

PAVA

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PROGRAMA DE AYUDA PARA LOS VECINOS DEL ALTIPLANO

AID PROGRAM for the residents of the
altiplano

FINAL REPORT

1. GUATEMALAN DISPLACED PERSONS NEEDS SURVEY COVERING
HUEHUETENANGO, QUICHE, WESTERN PETEN, PLAYA GRANDE
2. PROPOSED RELIEF OPERATIONS

(USAID Project No. DR-520-84-04)

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ANNEX "A"Purpose

To provide an informed estimate of the immediate needs of populations displaced by civil strife in the departments of Huehuetenango and El Quiché (including Playa Grande), to provide the best information possible on the size and location of distressed populations by department, municipality and language area, to determine the logistics and requirements of supply and delivery to the points of need, and, in case funding became available, to specify, in areas to be determined later, the personnel requirements, costs and time-frame of a detailed assessment of needs, resource delivery, monitoring and follow-up for the rapid distribution of relief supplies in these areas.

Scope of Work

The report will include, but will not be limited to, the following:

- A. Methodology - summary of the field survey and interview process, as well as other research upon which the report is based.
- B. Migration and resettlement patterns; living/shelter conditions; availability of essential services; estimated magnitude of displaced populations.
- C. Estimated health and nutritional needs of the affected populations.
- D. Recommendations for appropriate intervention by national and international efforts to assist the affected populations.
- E. Determination of agricultural cycles and estimate of supplies and resources needed to return affected communities to normal agricultural production.
- F. This survey and evaluation will be based, to the degree possible, on interviews with local officials and observations of the affected populations. In addition, interviews will be conducted with AID, the Government of Guatemala, private voluntary organizations, and other institutions and individuals with identified responsibility and expertise in programs related to the situation of displaced persons.

SUMMARY

SURVEY OF POPULATION NEEDS:

- Departments of Huehuetenango and Quiché
- Zones of Playa Grande, Western Petén

- 1) Violent activities attributed to guerrilla and counter guerrilla activity during the period 1981-1983 caused widespread destruction and massive population displacement in the north-west region of Guatemala.
- 2) Of the approximately 1 million residents of the region it has been estimated that at least 150,000 have fled to, and are currently refugees on Mexican territory and over 250,000 (50,000 families) are internally displaced and/or in need of subsistence, medical and agricultural support.
- 3) Relative tranquility has returned to most of the region with few, isolated exceptions. Near normal agriculture is enjoyed in some areas, but in other areas, numerous factors have reduced or eliminated food supplies and exacerbated chronic malnutrition.
- 4) Medical services are critically deficient throughout the region and virtually non-existent on the village level.
- 5) A return to agricultural self-sufficiency is possible within 1-2 years if resources and assistance are delivered to the affected areas before the start of the spring planting season in mid-May. Such assistance, for the estimated 50,000 needy rural families is approximately \$5,350,000. This cost presumes but does not include in-depth needs assessment, delivery or monitoring.
- 6) Subsistence food relief required for maintenance of 50,000 needy families during the growing season (May-November) is estimated at \$3,250,000 per month (\$65.00/family/month) or \$22,750,000 excluding assessment, delivery, monitoring. 1985 subsistence food relief could be virtually eliminated to many areas if a successful crop

is planted by mid-May, 1984. Failure to respond to the planting and fertilizer deadline will require additional subsistence food relief for most of 1985.

- 7) Potential relief expenditures (excluding medical) may be summarized as follows:

Funding before planting season 1984

Agricultural (seed, fertilizer, tools):	\$ 5,350,000
Subsistence food - 7 months:	<u>22,750,000*</u>
Total:	\$28,100,000

Funding after planting season

Agricultural (seed, fertilizer, tools):	\$ 5,350,000
Subsistence food - 19 months:	<u>61,750,000*</u>
Total:	\$67,100,000

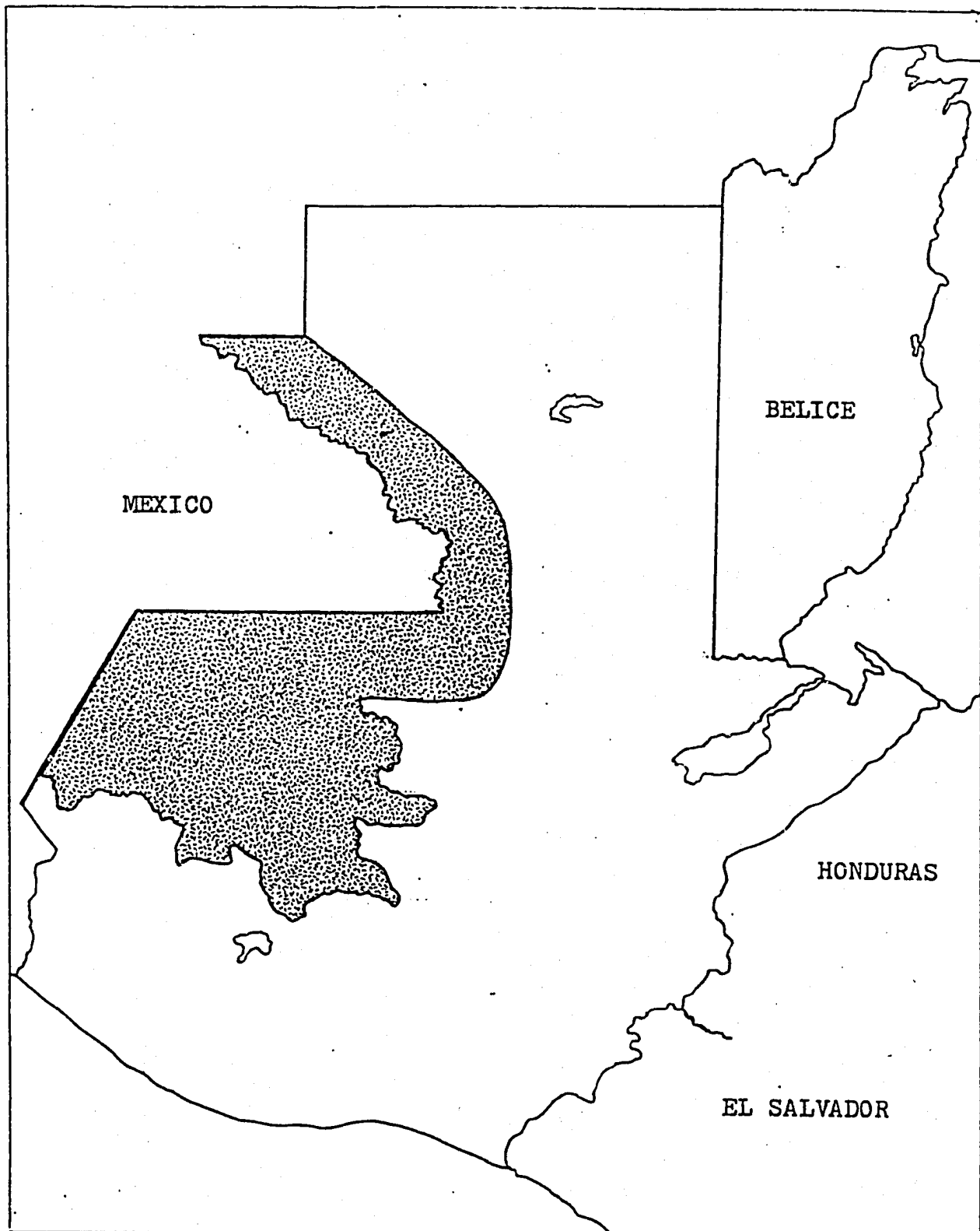
* Some foodstuffs are currently available in Guatemala through PI480, UN and national sources. Lack of assessment and distribution networks has reportedly hampered delivery of this food to some needy areas.

Establishment and maintenance of assessment, delivery, follow-up, monitoring network for 12 months: \$1,904,547.00

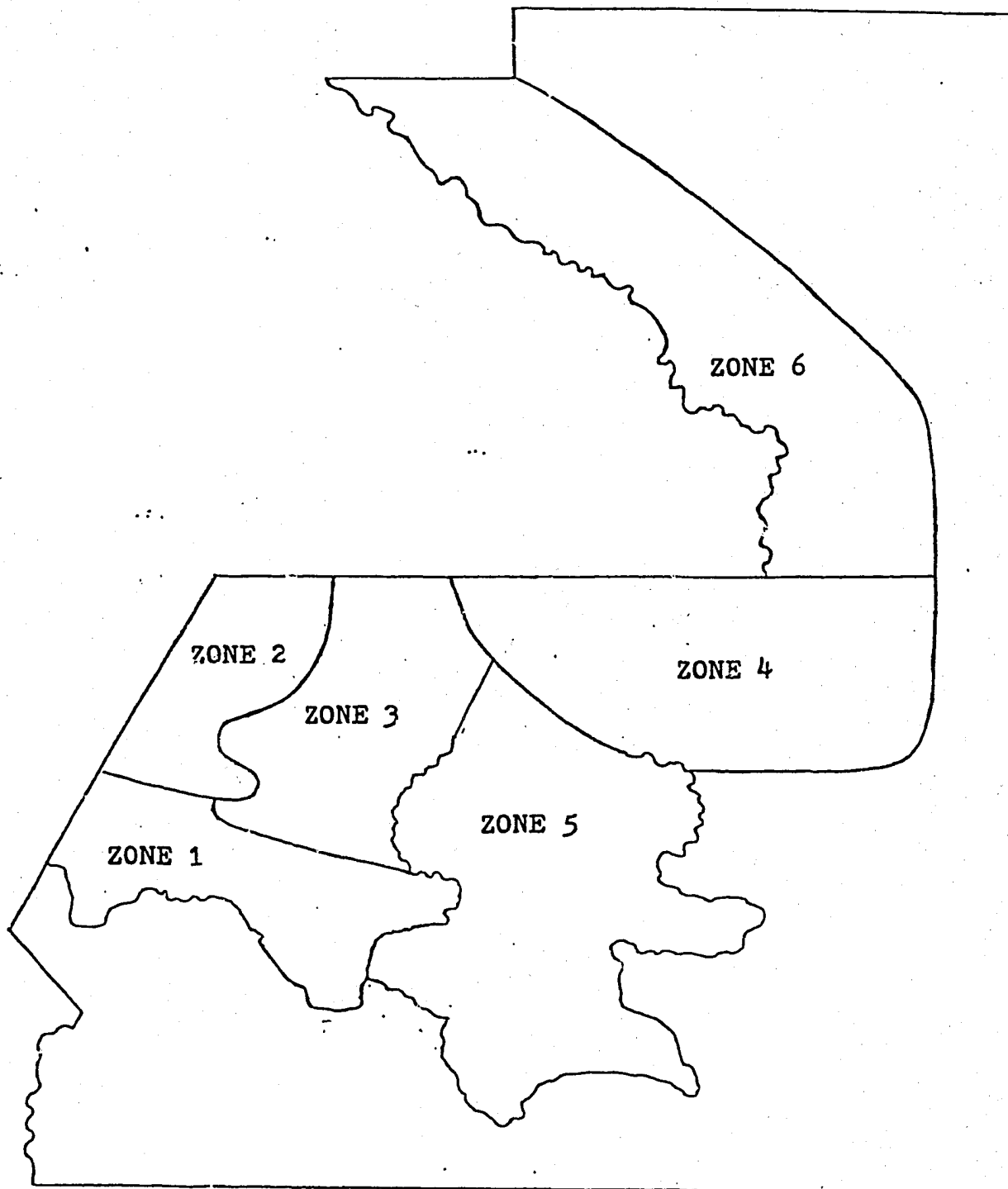
Local transport of agricultural resources
seed, fertilizer, tools (delivery to recipient villages): \$365,125

(000 2)

5,350
1,905
365
22,750
<hr/>
30,370



GEOGRAPHICAL AREAS SURVEYED



SURVEY REGION BY ZONES

- Zone 1 - Southern Huehuetenango
- Zone 2 - North-eastern Huehuetenango ↙
- Zone 3 - North-western Huehuetenango ↘
- Zone 4 - Playa Grande
- Zone 5 - Quiché
- Zone 6 - Western Petén



AREAS OF GREATEST NEED AS IDENTIFIED BY ANALYSIS OF SURVEY

A. METHODOLOGY

In order to determine the areas of greatest need, municipal-level interviews were scheduled, over a two-week period, in the entire region. While understood that only an approximate targeting of broad areas of need would be determined by such a survey, field personnel were trained and sensitized to the need for collecting specific, village-level information whenever possible.

a) Municipal interviews profile

One team of two members each visited and conducted interviews in each municipality of the entire region. A total of 51 municipalities and 31 individual villages were surveyed.

Where possible, at least three interviews were conducted in each municipality in order to maximize reliability of data and to provide a broad base of information. Survey personnel were instructed to conduct interviews with: 1) a group from the Mayor's office including the Mayor himself; 2) the military or Civilian Patrol commander of the town and, 3) doctors, nurses and/or health technicians staffing hospitals or health centers.

It was assumed that much valuable information about surrounding villages could be gleaned on the municipal level without actually visiting each village which, in any case, time and resources did not permit. This assumption, in fact, proved to be true. Relief assistance planners are cautioned, however, that this information is useful only in targeting areas for further study. Resources can be efficiently allocated only on the basis of village-level assessment. This is clearly demonstrated by the municipality of Nentón, Huehuetenango (Appendix - Zone 2.)

b) Data Collection forms

Three separate forms were developed for this summary (Appendix). These forms were pre-tested in the field and refined before the interview teams began training. 10-key indicators of needs were determined to be sufficient to locate and identify seriously affected areas. It is suggested that a fourth, municipal summary

form be included in further studies of this nature to facilitate de-briefing and report preparation.

c) Selection and Training

Thirteen interviewers were selected and trained in a 4-day program. This training included team-building exercises; data form familiarization, practice interviews, role-playing and sensitization to key indicators. In addition, survey teams were prepared with emergency communication systems and letters of presentation identifying them to Civil authorities. Full and enthusiastic cooperation of military and Civilian authorities was reported in all areas surveyed.

d) De-briefing and Data Analysis

Upon return from the field, each team was de-briefed by the Director and additional staff. The teams were asked to prepare a summary of their experiences in each municipality and then synthesize these into a summary of their entire zone. In addition, a group de-briefing of field personnel was conducted.

Data analysis was completed with the aid of field personnel and independent informants. Numerous sources (two physicians; one sociologist/anthropologist; one sociologist/linguist; three private relief workers), provided first-hand confirmation of much of the data collected (Appendix) Some of these sources also provided informed, eye-witness information about Guatemalan refugees living in Mexico.

B. I. MIGRATION AND RESETTLEMENT PATTERNS

Results of this survey indicate that the entire target area (Zones 1-6, see map), has been subjected to massive population displacement.

The bulk of this displacement appears to have occurred between mid 1981 - early 1983 but instances of migration have been reported as recently as February 1984. Fear, generated by the wave of violent activity was consistently reported as being the cause of this displacement. Widespread destruction of homes and public buildings, together with the killing (often indiscriminate) of village residents prompted the survivors as well as residents of neighboring villages to seek safer havens. Analysis of the data collected, together with information supplied by informed, independent sources indicate certain general patterns of displacement as follows:

- a) Those residents of Petén cooperatives living along the Usumacinta River who fled their homes sought refuge in Mexico.
- b) People living near the border in Playa Grande, northern Quiché, and north-western Huehuetenango, fled to Mexico. Few refugees living in Mexico walked more than one week and the average distance of their villages from the border does not appear to exceed 20-25 Kms. One notable exception is a group of people from Cobán who walked for six months to reach Mexico and are currently residing there.
- c) Persons displaced from southeastern Huehuetenango and central Quiché tended to seek safety in municipal urban centers (particularly Nebaj), following periods of up to three years of wandering and scavenging for survival. Many also fled to the Pacific Coast where they traditionally worked as seasonal laborers. Many of these people have apparently passed over into coastal Mexico and continue to reside there.
- d) Many residents throughout Huehuetenango and southern Quiché, fled to neighboring villages and sought refuge with relatives or friends. This is particularly true of widows with children who, though accepted and cared for by neighbors, place a severe strain on the already scant resources of many communities and in some cases have overwhelmed them.

e) Normal migration patterns of highland farmers have been interrupted due to Civilian Self-Defense Patrol service. Many farmers who traditionally earned cash as coffee or cotton pickers complained that service in the patrols did not allow them to be absent for periods long enough to travel to the Pacific Coast for income generating labor.

II. LIVING CONDITIONS

Displaced persons throughout the target area are reported as living under sub-minimal conditions. Overcrowding, and severe lack of sanitation facilities and potable water contribute to the desperate conditions under which these victims struggle for even a meager existence.

Persons living in the lowland areas of north-eastern Huehuetenango and northern Quiché or Playa Grande, have built temporary shelters of palm or cane. These serve well in those relatively warm areas but the people inhabiting higher, mountainous regions such as Chajul, Nebaj or Cotzal, suffer greatly from the cold, damp nights. Many displaced persons in Nebaj, for example, are housed in large, recently built sheds with no walls. These communal shelters, often holding more than 3,000 people*, are open to the elements on all sides and offer little shelter from mountain winds. Incidence of respiratory and gastro-intestinal infections is reportedly very high. This problem is exacerbated by the chronic and severe lack of medications and widespread, severe malnutrition.

III. ESSENTIAL SERVICES

With few exceptions, services such as medical assistance, food distribution and agricultural assistance are severely deficient or totally lacking.

a) Health Services - throughout the target area, all zones reported a general and critical shortage of medicine and medical personnel. Two exceptions were noted, both in south-western Huehuetenango. Two privately funded hospitals, one in Jacaltenango (established and run by the Maryknoll), the other in San Pedro Necta (established and

* As of this writing, 15 days post-survey, the main camp at Nebaj remains in a state of flux. Latest headcounts there show 675 people but that number, as little as two weeks ago, was over 3,500.

maintained by Maryknoll but staffed and run by Ministry of Health personnel) appear to be meeting the medical needs of those communities. The Jacaltenango hospital also runs a program of health promoters in the region.

In those communities where health posts exist, they are curative rather than preventive in orientation, understaffed, usually with a nurse or nurse's aid and receive minimum supplies of medication from the Ministry of Health. Reports from all areas surveyed indicate that a 3-month supply of medicine rarely lasts through the first month alone. Frustration and anger is evident among those health people concerned enough to stay at their posts. Relief does not appear to be forthcoming, particularly since the Ministry of Health recently announced budget cuts and subsequent reductions in future, quarterly deliveries of medicine. The vast majority of villages have no health service whatsoever. People must walk, usually more than a day and sometimes 2-3 days, to arrive at a health post which probably has no medicine for them.

b) Food distribution - some food relief is being distributed in certain areas. In the zone of Playa Grande, the Army distributes what food it receives from the National Reconstruction Committee among several camps and smaller communities throughout the region. The Army also distributes NRC food in southern Quiché but transport is severely limited and needy areas are virtually inaccessible.

Other organizations in the areas of Huehuetenango and Quiché include CARE, FUNDAPI, Community Development (Government of Guatemala) and Christian Children's Fund. Of these only CARE appears to have even a semi-organized food distribution program but it is reported to have little impact on the areas' malnutrition and is rife with distribution problems. Public Works/Army food-for-work projects are sparsely scattered throughout the southern Quiché region but here too, the food needs are far greater than can be satisfied. Only a small percentage of the region's men are served by these projects due to shortage of food. Also, since all food-

for-work programs involve construction or road-building, the most desperate element of the displaced society, widows and orphans, cannot be included.

United Nations Maternal/Child care programs were also reported to be distributing food rations in the municipality of Nentón, Huehuetenango.

Food rations are being distributed in the camps of Webaj and occasionally include animal protein in the form of salt fish (communally cooked in 55-gallon oil barrels.) Despite this, malnutrition in varying degrees is still evident among adults as well as children.

c) Agricultural Services - many municipalities reported the presence of DIGESA (Ministry of Agriculture) and BANDESA (National Agricultural Bank), particularly in southern Quiché and Huehuetenango. DIGESA's technical assistance may be available in the area but its effectiveness is questionable. Many communities reported poor crops in 1983 and a need for seed and fertilizer for the upcoming spring planting. In all fairness, it should be noted that DIGESA's structure and mandate was never meant to cope with agricultural problems of this type and magnitude: that is, a general, region-wide reduction in food crops, severely interrupted supply and delivery systems and entire communities of farmers unable to travel to their traditional farm parcels. In addition, reports from western Huehuetenango and parts of Quiché described a near-total loss of food crops due to severe weather conditions in late 1983. DIGESA, though well intentioned, cannot possibly hope to affect the regions' drastically reduced food production with its technical assistance alone. It should, however, be given serious consideration as an element of future, long-term assistance programs. BANDESA's role in the region is limited to the distribution of small-farm credit. Displaced farmers cannot usually take advantage of any program BANDESA has to offer since they have no farms of their own to plant. Reports indicate that BANDESA's fertilizer loan program had limited impact in this region. Field offices apparently lack personnel, transport and infrastructure needed to cover broad

areas. There also appears to be a lack of community advocacy to which BANDESA has historically responded in other areas.

IV. ESTIMATES OF DISPLACED POPULATION AND THEIR NEEDS

Reliable estimates of displaced persons and refugees are beyond the scope of this survey. Respondents, both civil and military often had little or no information about distant villages cut off from the outside world. In heavily distressed areas, populations are not stationary, moving about in search of food, shelter, safety. Accurate information about the numbers and locations of persons in need requires assessment at the village level by investigators knowledgeable about the area and who speak the local language. This survey identifies the areas where detailed investigation is required.

A) Refugees in Mexico: in addition to municipal level interviews conducted by PAVA personnel, additional sources of information were used in the preparation of this report. Five independent and informed sources were interviewed by the Project Director in relation to Guatemalan refugees living in Mexico. These sources have worked and travelled extensively in the refugee-laden border zone; three of them have actually entered and conducted studies within 14 refugee camps (including the three largest); and have conducted surveys and interviews with people from most of the other 78 recognized camps.

The conclusion of these eyewitness sources is that there are approximately 150,000 Guatemalan refugees currently living on Mexican soil. In the Margaritas jungle area of Mexico (along the northern border of Huehuetenango and Quiché) there exist actual headcounts of over 40,000 people. There are over 15,000 people living in the three enclosed camps of Chajul, Ixcán and Puerto Rico. Mexican immigration officials recognize 17,000 economic migrants living in the Tapachula region. They recognize no political refugees there, even though informed estimates have verified that approximately 55,000 additional Guatemalans are living in the area. These numbers do not include all of the cooperative people who fled across the Usumacinta River into the Marquez de Comillas region of Mexico. (Since this area is tightly controlled by the Mexican military, it is not possible to obtain independent data from there.)

The estimate of 150,000 greatly contradicts both official Mexican and Guatemalan estimates which are far lower. It should be noted that official Mexican estimates have steadily risen over the past six weeks. Most recent data available from Mexico recognize the presence of 120,000 Guatemalan refugees living there. This does not include 30,000 more cited by independent sources. Politics aside, the crucial issue is whether the Guatemalan Government actually believes that its published reports estimating 10-40,000 refugees is correct. If the Government of Guatemala is planning on the return of such a small group, they may in fact be setting the stage for a major disaster.

According to the sources interviewed, it is not likely that these refugees will be returning to Guatemala in the near future. It should be noted, however, that any program of repatriation should be planned on the basis of reliable census data collected independently of Mexican and Guatemalan government sources.

B) Displaced persons within Guatemala: results of this survey indicate up to 25% of the populations of Quiché and Huehuetenango are displaced and/or are in need of immediate assistance as a direct result of recent violence. The Petén zone appears to be more stable and capable of dealing with its own problems (with the glaring exception of transport and communication.) Playa Grande is in a constant state of flux and is, at present, almost completely dependent upon outside assistance delivered through the Army. There appears to be no life-threatening needs at present in this zone. There is, however, the concern that a large influx of returning refugees will create havoc throughout the zone and that massive assistance will be required there in the future.

Given the limitations of this survey, the numbers of displaced persons within the area and migrants who have left the area are estimated to be in excess of 250,000. Over and beyond this number are thousands, though not necessarily displaced, including widows and orphans, who lack adequate food, shelter and minimal health care.

C. ESTIMATES OF NEEDS

An accurate estimate of health and nutritional needs in the region will require more in-depth investigation, probably on the village level. Certain indicators resulting from this survey, however, do allow some general parameters to be defined:

I. Health Needs

- There is a general, chronic and severe lack of medicine throughout all the zones surveyed. Particular urgency is indicated in the departments of Huehuetenango and Quiché where colder weather, poor shelter, malnutrition and isolation exacerbate historic health deficiencies.
- Health Post personnel, without exception, report that quarterly deliveries of medicines are exhausted within one month. A first step in the estimation of medicine needs, therefore would be to multiply by a factor of three the quantities currently delivered to the health post by the Ministry of Health. Data from health personnel indicate that medicines most urgently needed are: antibiotics, oral re-hydration packets, anti-diarreahal medicines, intestinal parasite treatments, dermatologic medicines especially for scabies and conjunctivitis, vitamins and iron supplements.
- Provisions for medical outreach to the village level must be considered as a prime factor particularly in the more isolated region of northern Huehuetenango and the entire zones of Quiché, Playa Grande and Petén. A rough guesstimate would be to at least double the number of doctors and nurses in the highland regions with a major revitalization and expansion of rural health-worker programs.
- Particular note was made of the Técnicos de Salud Rural (Rural Health Technicians.) TSR's are trained in an AID-financed training center in Quirigua (southeastern department of Zacapa), and were consistently reported as being knowledgeable of all aspects of their assigned areas and effective in confronting those health problems endemic there. Serious consideration should be afforded this network in planning health assistance programs.

- Reports from health personnel interviewed in the target zone indicate a strong emphasis on curative medicines. Informed medical and Public Health consultants have stressed, however, that a preventive approach is also required in order to make a significant impact on the rates of morbidity and mortality throughout the region. This could include programs of nutrition orientation, potable water, sanitation, adequate vaccinations, housing and a realistic approach to family planning.
- Given the fluid situation of the Playa Grande zones and its total dependence on Army distribution, additional medics and supplies of medicine should be assigned to the commander of the Army base. These medics should also be provided with their own transportation, preferably helicopter, to service areas totally isolated from roads or rivers.
- Where available, existing medical outreach programs should be supported with training, medicines and transportation. An example of such programs would include the Maryknoll hospital in Jacaltenango which trains health promoters for all of Huehuetenango.

II. Nutrition Needs

- Malnutrition, in varying degrees, was consistently reported from most areas of Huehuetenango, southern Quiché and parts of Playa Grande.

This problem is not only apparent among displaced persons, but is endemic throughout these zones (with the exception of central Huehuetenango which appears to enjoy relatively normal agriculture according to reports.) Some of the factors which must be considered are:

- a) Severe weather conditions caused widespread damage to crops in parts of western Huehuetenango and central Quiché just before the 1983-84 harvest.
- b) Many displaced farmers cannot plant this spring as they are living in settlements, camps or villages where they have no land available to them.

c) Migration and deaths of adult males (during the 1980-1983 period of violence) has drastically reduced farm manpower in some areas.

d) Some farmers (Mexican border zone of Huehuetenango; central Quiché reported that they will not attempt to plant this spring (even though they have land available to them) out of fear they will be shot by guerrilla snipers. Other farmers are unable to plant traditional farms farther from their homes due to travel restrictions or voluntary Civil Patrol duties.

e) A number of municipalities in central Quiché report that 1983-84 harvests were stolen by guerrillas, leaving many villagers without food.

f) Transportation networks in central Quiché and parts of northern Huehuetenango were seriously affected or totally destroyed during the period of violence. Supplies of seed and fertilizer were curtailed for many months throughout these areas. Many of these networks have been recently rebuilt but some areas (Chajul, Joyabaj) are still reported to be deficient in transport facilities.

The sum total of the above factors is a greatly reduced supply of locally grown foodstuffs. The entire region (with few exceptions) is now, more than ever before, dependent on outside resources for its very existence.

- Survey personnel reported a number of institutions presently distributing food in the affected regions (see Section D.) There is little indication, however, that these programs are having any major impact on the total nutritional problems of the people.

- Food assistance programs must take into account traditional diets of the affected population. Corn, black beans and chile peppers are essential to the normal life style of the highland people. Aside from being culturally acceptable, these basic foods, can reasonably cover dietary needs. Attention to this detail is essential and was consistently emphasized by survey personnel from all regions.

- The need for potable water in rural communities became most apparent during this survey. Intestinal parasites have always been endemic to the rural population of all regions but malnutrition and the lack

of health services has elevated the problem to life-threatening levels in many communities. In the opinion of survey personnel, the greatest long-term impact on improving the quality of life in the region, dollar for dollar, can be made with the development of potable water delivery systems.

- The needs of widows and orphans in many villages and urban center is a particularly urgent problem which requires immediate attention. Complete lists of widows and orphans are compiled by civil authorities and are apparently kept up to date. Some examples of this problem were reported by survey personnel: Chiché - 466 widows, 1,125 orphans; Barillas - 800 widows; San Mateo Ixtatán - 150 widows; San Juan Cotzal - 200 widows. (Verified average of 3 children/widow.
- Incaparina, a locally developed and produced protein-caloric-vitamin food supplement was widely reported as having high cultural acceptance throughout the region. Two recent improvements of this supplement in the forms of an instant beverage and a cookie flour have become very popular wherever distributed. Significant reductions in malnutrition levels are possible through the proper use of these products but current distribution is limited pending further funding (see Section D. I.b - Caritas.)

Based upon PAVA's on-going experience in the Department of Chimaltenango, the cost per person per month for food alone is calculated at approximately \$13.00 or \$65.00 per family of five. Overall estimates based on this survey would indicate that as much as \$3,250,000 per month could be required to sustain the approximately 50,000 families in need throughout the target area. This figure will, of course, diminish as agricultural production increases in the region, but only if farmer assistance is forthcoming before the beginning of the planting cycle, no later than early May (see Section E.)

D. I. NATIONAL AND INTERNATIONAL RELIEF PROGRAMS

The following organizations were identified by survey personnel in the zones covered:

a. National organizations

- Guatemalan Army: relief efforts are mainly in the form of transportation and distribution of governmental and donated resources. The Army is particularly important in the Playa Grande zone as it comprises the only means of distribution for needy people. The sole exception is Project 520 (see Appendix - Summary Report) a model area which has a number of agencies at work. The military bases at Santa Cruz del Quiché and Nebaj are also deeply involved in resource distribution but are frustrated by limited transport facilities. Foodstuffs and roofing material distributed by the Army was reported as being donated by the National Reconstruction Committee.
- National Reconstruction Committee: the NRC is a holdover organization from the 1976 post-earthquake period. It was formed to coordinate relief efforts during that disaster and, in recent years, has been called upon to channel assistance to violence-affected areas of the country.

Reports of food and some construction materials being donated to surveyed areas were frequent. Resources donated by the United Nations World Food Program are distributed through NRC. The NRC, however, has frustratingly limited transport and only delivers directly to municipal centers or Army bases and it was doubtful, in some cases, if resources were actually reaching the stricken populations at the village level or, if the food was nutritionally acceptable. In Santa Cruz del Quiché there were reports of effective intervention on the part of NRC because of the dynamic qualities of its regional coordinator there. In general, opinions of those interviewed were low concerning NRC relief assistance.

- DIGESA: an agency of agricultural extension, DIGESA was often mentioned as having a presence in many municipalities. Unfortunately

its effectiveness is quite low as its agronomists receive no per diem, have little or no transportation and are not trained to handle the massive problems of region-wide agricultural depression as described in Section C, above.

Other agencies present in the affected zones are:

- FUNDAPI: (Fundación Nacional de Ayuda a Pueblos Indígenas) FUNDAPI is a national organization but its major funding appears to be from international sources (primarily evangelical churches.) They are providing some medical assistance to displaced persons camps in Nebaj and have vegetable garden and irrigation projects, in other communities of the "Ixil triangle" (Nebaj-Cotzal-Chajul.)
- Comité Central de Acción Social: semi-autonomous branch of Bienestar Social distributing United Nations maternal/child food in nine municipalities of the surveyed region.
- BANDESA: National Agrarian Bank
- INFOM: Municipal Development Institute
- INTA: Agrarian Transformation (reform) Institute
- INACOP: National Cooperative Institute (Petén only)
- Salud Pública: Public Health (TSR Program, Section IV - C)
- Desarrollo de la Comunidad: National Community Development Agency

Although these agencies are present in some of the affected areas, the general impression is that their assistance is minimal, sporadic and only marginally effective in addressing the broad, immediate problems of the region.

b. International organizations

- CARE: two food relief programs of CARE were identified in a number of communities, particularly in southern Quiché and Huehuetenango. Food for pre-school children and food for lactating mothers were reported as suffering from similar problems. 1) minimal rations are distributed to families based on the number of children under the age of five with an extra ration for a pregnant or nursing mother. This food, however, is usually used by the entire family, thereby diluting its effectiveness among the intended recipients.

2) misunderstandings related to distribution have led to the termination of distribution in some communities. 3) accusations that some recipients have sold their rations has caused CARE to reduce or eliminate its distribution to needy people in some villages of Quiché. CARE policy does not allow this even though their food, while perhaps not culturally acceptable to a recipient family, may in fact be used as barter or exchange for foodstuffs more palatable to them.

- United Nations World Food Program: UN Representatives have indicated that unlimited food resources are available for Guatemalan relief. UN food must all be channeled through NRC, however, and its severely limited transport facilities form an almost impassable bottleneck to these resources.

- Caritas: no direct reports of this agency's presence in the region were forthcoming from the survey. Independent sources, however, confirm Caritas funding of a small but effective group of concerned and active Guatemalan women, affectionately termed "the Cookie Ladies." Officially called Hermano a Hermano (Brother to Brother), this group has been instrumental in the production and distribution of food supplements developed by INCAP - a nutritional research institute based in Guatemala. In addition to private funds raised by this dynamic group, Caritas funding has allowed the "Cookie Ladies" to distribute in various villages of Quiché. Serious consideration of food supplement projects such as this were recommended by survey personnel.

Other international organizations at work in the area include:

- Integrated Canadian Network: reports were unclear but ICN is constructing an orphanage in Chichicastenango and appears to provide international adoption services.

- Save the Children: identified in Santa Cruz del Quiché, Lemoa, Chichicastenango, Joyabaj and San Antonio Ilotenango. Primarily involved in developing income-generating projects of arts and crafts for widows.

II. OBSERVATIONS ON RELIEF ASSISTANCE

Analysis of survey data combined with long-term experiences of PAVA personnel and informed sources indicate the following as essential elements to an effective relief assistance program:

1. In-depth, village level investigation is of paramount importance in planning and implementing any relief program in the surveyed area. Reports show that a municipal level survey is effective in identifying target areas and, in some cases, specific population groups with immediate needs. Due to relative isolation of the majority of communities however, municipal information may be incorrect or non-existent. Of particular note is the municipality of Nentón which covers an area of over 1,000 Kms.² Survey personnel "discovered" a community in this jurisdiction (Paluá - 300 people) which was not even registered or acknowledged in the Mayor's office.

Specific needs will often vary sharply from village to village even among those in close proximity.

Several communities were noted as living under relative normalcy while neighboring villages struggle under massive burdens of food shortages, health problems and high numbers of widows and orphans. Reliable, village level data is required to differentiate between needy and normal communities and to minimize duplication of efforts and mis-direction of resources.

2. At present, there is no single organization extant which is capable of dealing with a region-wide, relief assistance program. Those agencies which do have a presence in the area are generally involved with specific communities and, in terms of overall needs, their assistance is token, at best. Effective, direct distribution of resources will require the prior development of a broadbased network, sensitive and responsive to the needs of individual village-

Reports of survey personnel strongly indicate that attempts to channel resources through existing agencies currently present in the region will only result in exaggeration of the problems discussed in Section D. above.

3. Distribution of resources must, without exception, be channelled and monitored directly to the recipient village level. Current experiences of agencies delivering to municipalities or Health Posts indicate that large percentages of resources are lost, mis-directed, improperly managed and stolen when middle-level municipal management is inserted between prime suppliers and recipient.

Survey personnel and the PAVA Board concur that advantage should be taken of the Alcaldes Auxiliares (Auxiliary Mayors) of each village for the efficient distribution of resources. This network of village advocates has functioned for generations and together with civil patrol leaders can be relied upon to insure that donated resources do, in fact reach those most in need. These existing networks can also be used to great advantage in the initial, in-depth assessment of village needs as well as in monitoring and follow-up activities.

4. Care should be taken to insure that food and clothing assistance be culturally acceptable and reflect traditional diets and lifestyles. To insure these factors, local purchases, to the extent possible, should be given priority over imported goods. Additionally, purchasing locally will eliminate the bottlenecks of Customs formalities and bureaucratic bungling, thereby accelerating and streamlining the distribution process.

5. The need for corn seed of acceptable varieties is absolutely essential to the success of any assistance program aimed at the restoration of agricultural self-sufficiency in the affected regions. In addition, the need for adequate fertilizer for this year's crop is essential to maximize production.

E. ESTIMATES OF AGRICULTURAL CYCLES AND RESOURCES

1) Reports indicate that there are some areas with divergent planting cycles. However, the vast majority of highland farmers in Huehuetenango and Quiché must plant their corn no later than mid May due to local weather patterns.

It is essential that agricultural resources be supplied in time for planting cycles in order to re-establish, as quickly as possible, relative self-sufficiency in the affected communities. Lacking this, it may be necessary to provide subsistence relief on a massive scale for an entire year. The need for expeditious allocation of sufficient relief funds cannot be over stressed.

2) Based on PAVA's experience of relief assistance in the Chimaltenango area, the cost of seed, fertilizer, tools, building materials and blankets, where needed, is estimated at \$107.00 per family. Given the estimated 50,000 needy families in the surveyed areas, required agricultural and housing assistance, could be calculated at approximately \$5,350,000 not including distribution. This assistance, however, will only be effective in restoring agricultural self-sufficiency if delivered in the form of needed supplies before the early May planting deadline so that a fall 1984 harvest may be realized.

If this planting deadline is not met, funding agencies will, without doubt, be faced with the need for subsistence support through the fall of 1985.

A PROPOSAL FOR RELIEF INTERVENTION

The survey conducted in the Departments of Huehuetenango, Quiché and Petén reveals areas in these departments where failure to provide relief and assistance will result in mounting suffering, social and political destabilization. Areas in the Departments of Huehuetenango and Quiché are beset with life threatening problems which demand immediate attention; 1) the lack of seed and fertilizer to insure a subsistence harvest this year and, 2) the provision of food and medical attention to carry 50,000 families, or 250,000 people until that harvest. The need for seed must be met in May 1984 and fertilizer no later than June 15, 1984. These goals can be met.

1) PAVA proposes an integrated two stage approach to ensure on-time delivery of seed corn and follow on delivery of fertilizer, food, bean seed and medical attention. The organization structure, logistical support required and budget are detailed on the following pages. A detailed medical relief program has been contemplated but not included in the emergency intervention program. An illustrative budget for this program is included as an appendix to this report.

To meet the last planting deadline, representatives of PAVA will meet with all Mayors in affected areas calling upon their information network to provide as soon as possible the names of villages and numbers of families requiring seed corn. At the same time, selection and training of bilingual field teams will be started, appropriate varieties of seed corn purchased, packaged in 25 lb. bags and placed in strategic locations for rapid distribution. Once requirements are known and seed on hand, Mayors will be advised to assemble all recipients on a given date at the municipal center. On that date, PAVA will dispatch to the designated location, trucks with seed and members of the field team to supervise distribution.

2) Following the distribution of seed corn, the field team will report for completion of training in needs assessment; interviewing techniques, tabulation, observation, and the mechanics of monitoring distribution.

These bilingual field teams will then proceed to assessment of needs in affected villages and populations; fertilizer, food, etc. Given present estimates of such needs, fertilizer and food will be made available in strategic locations for rapid delivery. Needs assessment will be followed by delivery of supplies in each area before assessment is undertaken in the next area. The delivery and distribution of all supplies will be overseen by field teams. Once all areas have been initially covered by assessment and supply, villages and populations will be monitored on a monthly basis to insure that relief has indeed reached them and to assess the utilization of supplies and further needs. The on-going monitoring of relief intervention, often neglected and poorly understood, is essential to the success of this program.

3) The following chart shows the field organization for needs assessment and resource distribution.

The target region is divided into three zones: 1) Huehuetenango, 2) Quiché, 3) Playa Grande - Petén. Each zone will have a zone director responsible for all activities in his zone including contact with military and Civil authorities, scheduling of assessments, storage and distribution of supplies, general management, communication with the operations manager.

Each zone will be divided into two areas, each with a coordinator and six man bilingual (Spanish/local language) field team, including a team leader, in a ratio of one field worker per 8,500 population. Field teams will be given 1-2 weeks of intensive training in needs assessment and resource distribution, including administration and coding of interview schedules and field observation.

The six area coordinators will be responsible for coordination and backstopping of field teams under their supervision, collection and quality of data, trouble shooting, monitoring, distribution and reporting to their respective zone directors.

Field teams will be supplied with motorcycles, area coordinators with pick-ups and zone directors with 4-wheel drive cars. The associate directors, operations manager and director will have a pool of one vehicle, one pick-up and one 4-wheel drive car. For the area coordinators and zone directors, the project will provide headquarters with facilities for communications, vehicle storage, field team meetings, administration and reporting.

(4)

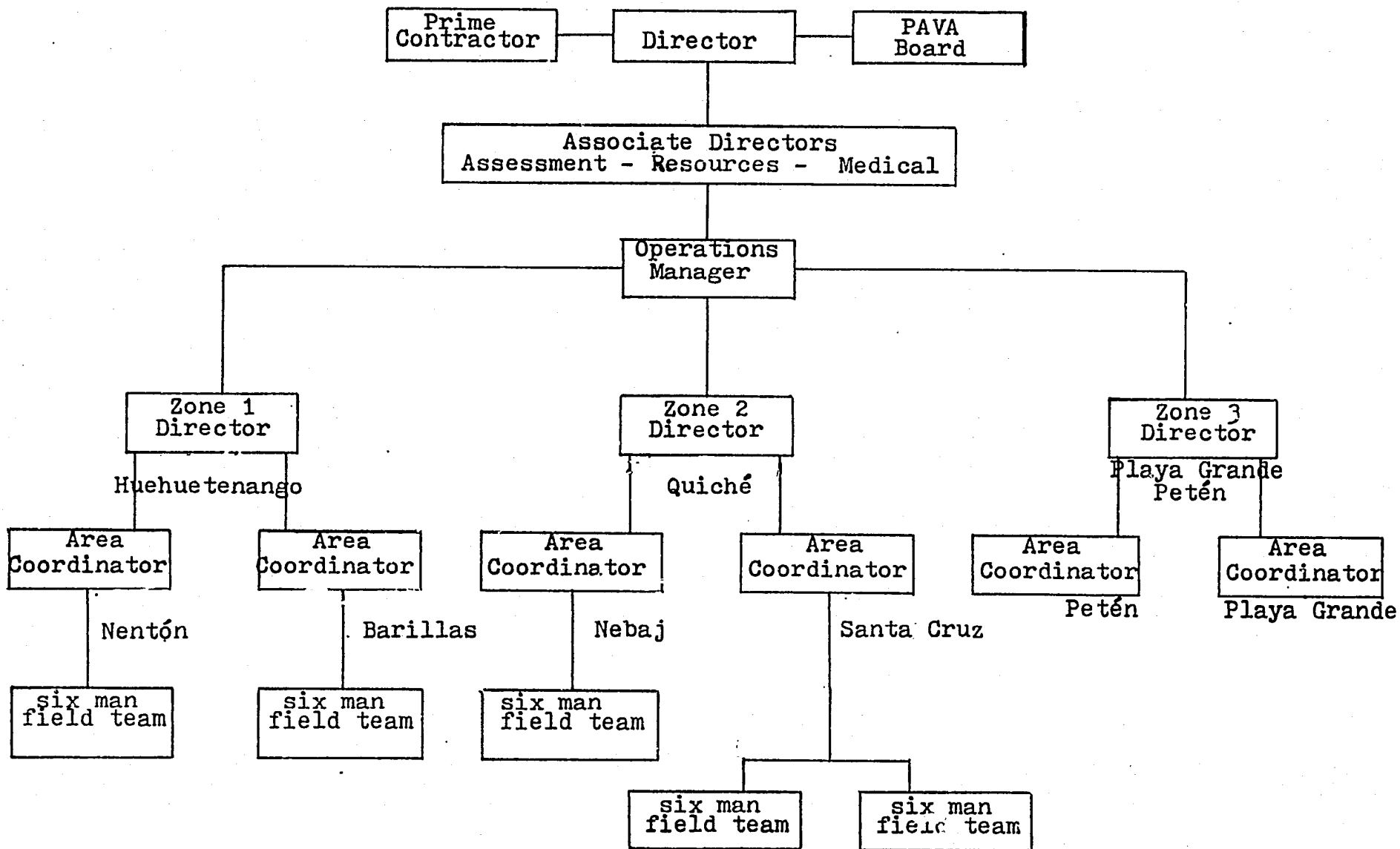


TABLE OF ORGANIZATION:
Proposed Emergency Relief and Maintenance Program

Huehuetenango: Zone 1

Estimated population: 485,000

Estimated target population: 75,000

Language groups: 5 (Kanjobal, Chuj, Jacalteco, Mam, Aguateco)

Bilingual field teams (Spanish, local dialects): 12

Area Coordinators: 2

Zone Director: 1

Zone Assistants: 2

Quiché: Zone II

Estimated population: 670,000

Estimated target population: 175,000

Language groups: 4 (Quiché, Pocomchi, Uspanteco, Ixil)

Bilingual field teams (Spanish, local dialects): 18

Area Coordinators: 2

Zone Director: 1

Zone Assistants: 2

Playa Grande/Petén: Zone III

Although currently life-threatening needs do not appear to be indicated in this zone, the population is heavily dependent on sporadic delivery of outside resources. One Zone Director and two Area Coordinators (one each for Playa Grande and Petén) are included to assess and plan for anticipated influx of returning refugees from Mexico. Reported was a deep and widespread concern for the ability of existing distribution programs to withstand such a potential additional strain. In addition they will: 1) assess and plan for longer range re-settlement programs for returning refugees; 2) act as regional advocates for resource allocation, distribution and follow-up.

4) TRAINING

Field teams, area supervisors and zone coordinators will attend a 1-2 week training program which will include supervised field work.

5) CENTRAL ADMINISTRATION (GUATEMALA CITY)

Staffing

1 Project Director, 1 Operations Manager, 3 Associate Directors (assessment, resource distribution, medical programs), 2 bilingual secretaries, 1 Comptroller and Accountant.

Functions

1. general program administration
2. personnel policy
3. liason activities with the Guatemalan government
4. contracting
5. reporting
6. informing the collaborating organizations and agencies of specific assessed needs and coordinating supply and delivery
7. providing storage and trucking where necessary
8. accounting
9. legal responsibilities
10. insurance coverage
11. purchase of supplies and materials when funds, in lieu of said supplies, are provided

6) PROCEDURES

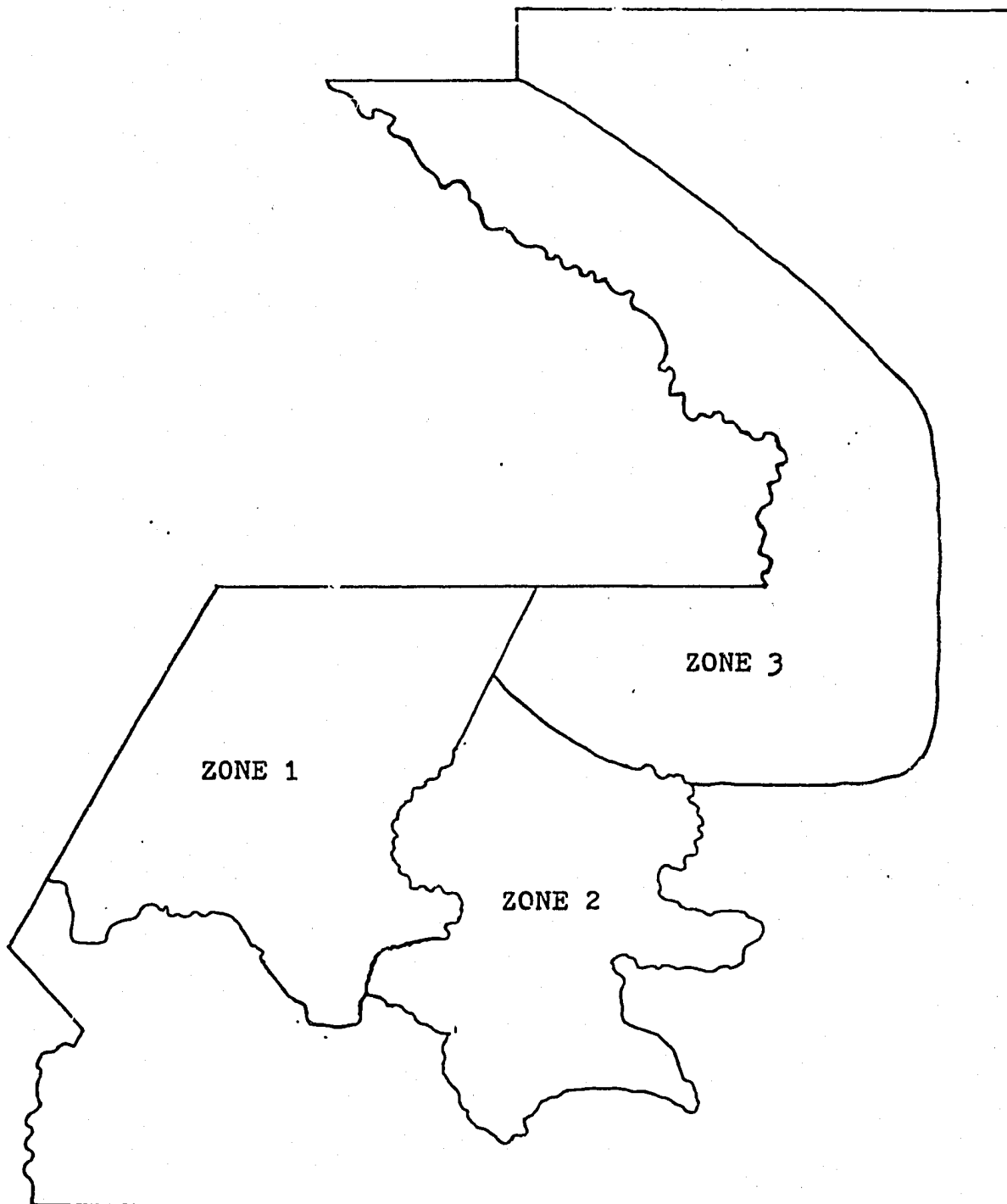
The field team assessments will be validated by the area coordinators who will determine specific needs (types and quantities) and delivery strategies. This information will be used by the zone director who will establish the schedules for supply and delivery to the zones under his administration. He will also inform the central administration of the ongoing progress and obstacles of the project. The central administration will be responsible for the procurement of needed supplies and delivery to specified warehousing points. Zone directors will advise area coordinators of delivery schedules. Deliveries from the warehouses to the communities will be monitored by area coordinators.

and field teams. The central administration will receive field reports, and advise participating organizations and agencies of progress.

Supplies of food and agricultural supplies will be provided for limited periods of time in exchange for community oriented work projects. Periodically, the recipient communities will be reassessed to determine further needs. This procedure will continue until the communities are able to resume self-sufficient, productive lives.

45

2



ZONE DIVISION FOR PROPOSED INTERVENTION

1. Huehuetenango
2. Quiché
3. Playa Grande-Petén

I. Primary Contractor: Tulane University (12 months)

A. Personnel

1. Program Director (M.D./Ph.D) 25% time in N.O.	\$ 12,000
2. Coordinator (M.D. & M.P.H.) 100% time	40,000
3. Secretary 50% time	6,000
4. Data Management 50% time	<u>14,000</u>

Sub-total 72,000

5. Fringe (est. 20%) 14,400

TOTAL - A \$ 86,400

B. Travel

1. Airfare - 16 trips @ \$350	\$ 5,600
2. Per diem @ \$70/day x 7 days x 16 trips	7,840
3. Miscellaneous @ \$100/trip x 16 trips	1,600
4. Excess baggage @ \$100/trip x 16 trips	<u>1,600</u>

TOTAL - B \$ 16,640

C. Other Direct Costs

1. Office Supplies @ \$100/month x 12	\$ 1,200
2. Computer (KP, Run and Connect)	10,000
3. Phone, Telex, Postage @ \$300/mo. x 12	3,600
4. Reproduction and Printing @ \$367/mo. x 12	4,400
5. Rent @ \$1,200/mo. x 12	<u>14,400</u>

TOTAL - C \$ 33,600

Sub-total - A, B, C 136,640

University Overhead - 43% 58,755

GRAND TOTAL I \$195,395

NOTE: This budget is illustrative. Tulane University School of Public Health and tropical medicine has tentatively agreed to be the primary contractor. Negotiations, however, have not been finalized.

II. PAVA (sub-contractor) Operational Budget - 12 months

A. Personnel

1. Director: \$4,000 x 12 months	\$ 48,000
2. Operations Director: \$3,500 x 12 months	42,000
3. Associate Directors: (3) \$3,000 x 12 months	108,000
4. Zone Directors: (3) \$1,200 x 12 months	43,200
5. Zone Assistants: (4) \$500 x 12 months	24,000
6. Area Coordinators: (5) \$800 x 12 months	48,000
7. Group Leaders: (5) \$350 x 12 months	21,000
8. Field Team: (30) \$300 x 12 months	108,000
9. Secretary, Bilingual: (1) \$600 x 12 months	7,200
10. Secretary, Bilingual: (4) \$500 x 12 months	24,000
11. Drivers: (2) \$350 x 12 months	8,400
12. Watchmen: (4) \$300 x 12 months	14,400
13. Comptroller: \$1,500 x 12 months	18,000
14. Accountant: \$1,000 x 12 months	12,000
	<hr/>
	\$526,200
Benefits @ 25%	131,550
Consultants	15,000
	<hr/>

\$672,750

B. Capital Expenses

1. Offices: (3) (furniture, typewriters)	20,000
2. 4-wheel drive vehicles: 7 x \$12,000	84,000
3. pick-ups: 4 - \$14,000	56,000
4. Van: 1 - \$18,000	18,000
5. Motorcycles: 34 - \$1,900	64,600
	<hr/>
	\$242,600

C. Gas, oil, maintenance

1. 4-wheel vehicles: 11 x \$350 x 12 months	46,200
2. 34 motorcycles: 34 x \$125 x 12 months	51,000
3. Mileage: personal cars @ 0.25/Km. for 10,000 Kms.	2,500
	<hr/>
	99,700

D. Vehicle insurance

1. 4-wheel vehicles	5,500
2. 2-wheel vehicles	8,500
	<hr/>
	14,000

E.

1. Office Space Rental: (3 offices)	\$ 24,000
2. Office start-up: \$1,000 x 3 offices	3,000
3. Office supplies: 3 x \$300 x 12 months	10,800
4. Photocopies	10,000
5. Utilities/Miscellaneous	<u>10,000</u>
	\$ 57,800

F. Communications

1. Radios: 8 x \$700	5,600
2. Telephone	7,000
3. Telex	3,600
4. Postage	<u>600</u>
	\$ 16,800

G. Air Travel

1. Internal	\$ 75,000
2. International	5,000
3. Per diem	<u>5,000</u>
	\$ 85,000

H. Transport - Agricultural Resources Only

1. Corn seed: 625 tons x \$20/ton	\$ 12,500
2. Bean seed: 250 tons x \$20/ton	5,000
3. Fertilizer: 15,000 tons x \$20/ton	<u>300,000</u>

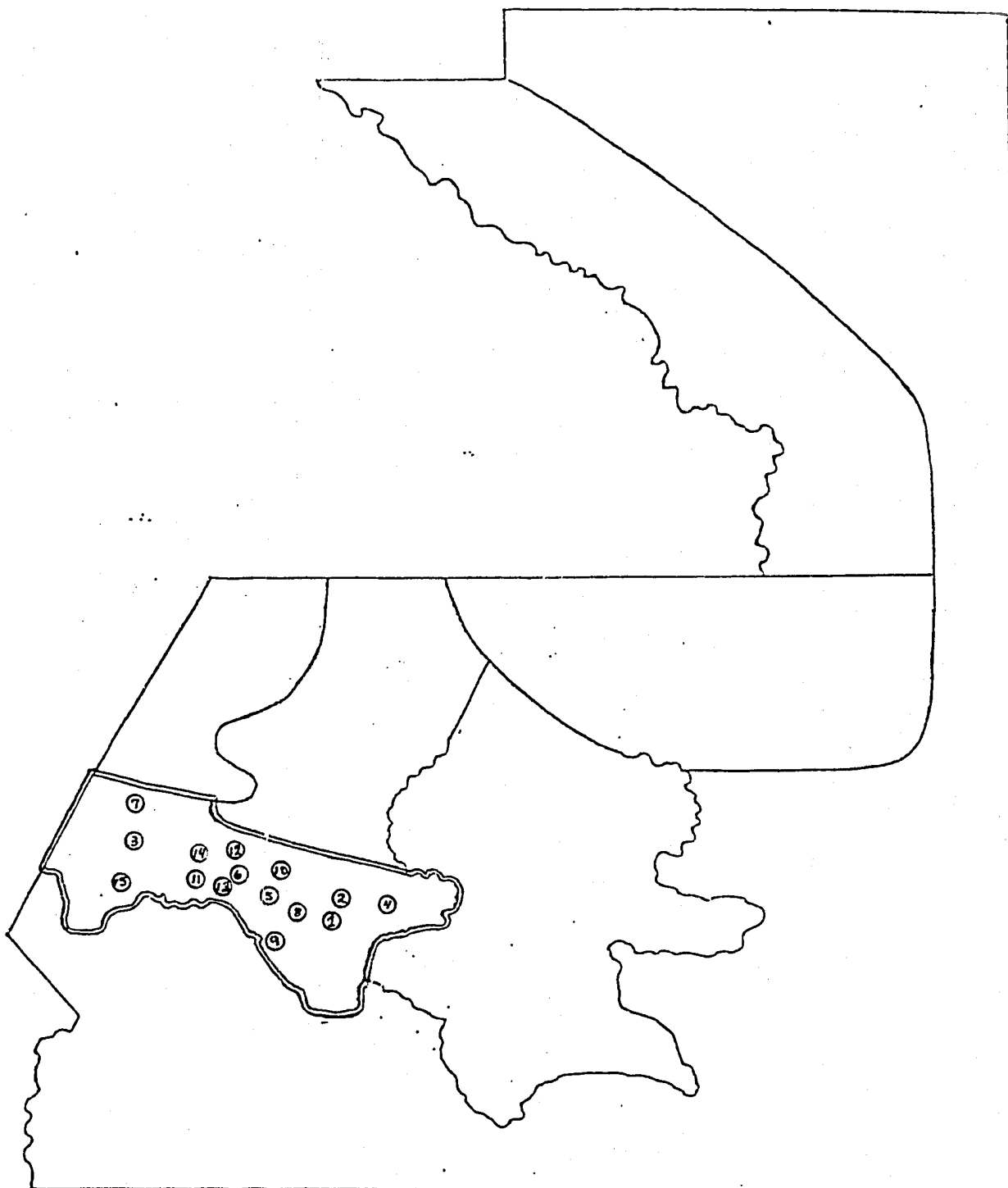
15% miscellaneous 317,500
47,625

Sub-total: 365,125
10% Overhead: 1,553,775
155,377

SUB-TOTAL: \$1,709,152

Prime Contractor - Tulane University 195,395

TOTAL: \$1,904,547



Summary: Zone 1
Southern Huehuetenango

MUNICIPALITIES SURVEYED:

- | | |
|----------------------|------------------------------|
| 1. Huehuetenango | 8. San Sebastián Huehue. |
| 2. Chiantla | 9. Santa Bárbara |
| 3. La Libertad | 10. San Juan Atitán |
| 4. Aguacatán | 11. San Ildefonso Ixtahuacán |
| 5. San Rafael Petzal | 12. Santiago Chimaltenango |
| 6. Colotenango | 13. San Gaspar Ixchil |
| 7. La Democracia | 14. San Pedro Necta |
| | 15. Guilco |

ZONE SUMMARY:

General Observations

1. Geography played an important role in determining which areas were affected by the violence as well as the current economic state of communities.
2. Time spent in Civil Patrols cuts deeply into peasants' earning capacity. The smaller the community, the greater the burden.
3. Lack of medicine is general in all areas.
4. There are many widows and orphans scattered over the whole zone.
5. Malnutrition to varying degrees was observed and reported in all areas visited.
6. Most of the violence took place between November 1981 and June 1982.

The Pan American highway runs through this area and was the focus and means of access to the communities where most of the violence occurred. Other areas affected are those which border the municipality of Nebaj at the eastern end of this zone, particularly in the municipality of Aguacatán. Deaths were mostly at the village level and were scattered over the majority of the area. There were no large concentrations of deaths in specific communities.

Reported and observed was a great lack of medical equipment and medicine at both municipal and village levels. Although health workers interviewed appeared to be conscientious, they were very discouraged by the lack of support in medical supplies, equipment and infrastructure. Health workers appear to have good contact with the villages and had a good idea of the problems of the area. (TSR - Rural Health Technicians.)

Municipalities located on the south face of the Cuchumatán mountains (north side of the Selegua Valley), have good access to sources of potable and irrigation water. Consequently, there is good agricultural production and potable water in this area, although there is a lack of delivery systems in the villages.

We feel this area has great development possibilities in potable water and irrigation, and would show the greatest improvement in the quality of life per dollar invested.

The Cuilco valley is much dryer and has worse soils than the Cuchumatán. Consequently, crops are poorer, sanitation and potable water worse and malnutrition more extensive. Fertilizers are essential in this area and are the focal point of peasant concern.

Economically, this area depends on migratory work in the south coast for cash as most people have only subsistence corn/beans crops. This system has been severely interrupted because of service in the Civil Defense Patrols (PAC). Since all the men in each community must participate in PAC, they do not have time to go to the South Coast and work. Therefore, they don't have cash for fertilizers and other needs. The smaller the community, the smaller the pool of men and consequently, the greater frequency of service. Generally speaking, the more rural the community the greater is the amount of work time taken from the peasant.

Reported was general malnutrition previous to the violence, a phenomenon which has aggravated the situation. The extent of the aggravation is determined by size of community, quality of soil and water, and burden of widows and orphans. Widows and orphans are definitely the most affected.

CARE projects were prevalent in all schools in the form of food supplement (Incaparina) from kindergarten through first grade. In some places CARE also had pre-school (under five years) food programs. In most places, however, these programs were cut off about two years ago. Some municipalities had stopped this service themselves because of problems of distribution within the municipality. CARE pays for the products which are delivered directly to the Health Center. The distribution of products from the Center to the Health Posts and villages is a cost that the municipalities must pay. Due to insufficient funds at the municipality level, the villagers were asked to contribute 0.10¢ per family to defray delivery costs. As the people are so poor and cannot even raise this minimal sum, delivery of CARE food was stopped in many villages. Because of bad organization and lack of knowledge the Health Post's personnel have not been able to find a solution to this problem.

Throughout the municipalities of the Southern Huehuetenango area, we found cultural factions within the Mayor's offices. Indians comprise between 80 to 100% of the village population in this area. The Mayor's offices, however, were often made up of Ladinos (Spanish-Indian or mestizo origin) from the urban center and not from the villages. This often resulted in Civil authorities that were not aware of the problems in the villages. If they were aware of these problems, it was general information gathered through hearsay and not directly from the villages themselves. We mention this in the hope that when it comes time to distribute supplies or technical advice, this be done on the municipal level but with the Assistant Mayors from the various villages present so that the resources reach the village and hamlet level and not remain solely in the urban center.

MUNICIPAL SUMMARIES

1. Huehuetenango (municipality)

The municipality of Huehuetenango was not directly affected by the violence. Previously, there were people displaced from other areas in camps in Huehuetenango, but they have since returned to their homes.

The Mayor and Assistant Mayor, are a very dynamic team who are organizing the efforts of Government and private institutions working in the area. They seem to be informed, concerned and effective people.

2. Chiantla

Located very near the department capital of Huehuetenango and having generally good access, Chiantla was, in large part unaffected by violence with only three exceptions. These villages, which are quite inaccessible, are:

1. San José Las Flores

Health Post, school and houses destroyed. People left the village and are only now (March 1984) beginning to return.

Last year's harvest lost - stolen by guerrillas. Residents are going to plant corn this Spring but how they are surviving now is unclear. It is a 2-day walk from Chiantla to San José, and at least a 1-day walk through the municipality of Todos Santos Cuchumatán.

2. Mixlaj

Health Post, school and houses destroyed. 2-day walk into the village. Situation unclear due to inaccessibility.

Harvest lost to the guerrillas.

3. Palo Grande

School and houses destroyed, violent deaths uncertain; present situation unclear as it is a 2-day walk to reach the village.

It is highly probable that these three villages are in need of immediate assistance but precise demographic data is unavailable.

3. La Libertad

La Libertad was perhaps the least affected municipality of the area. The only real effect of the violence was the killing by guerrillas of five PAC men from the village of El Mertón. Otherwise, the municipality was calm and commerce was little affected.

4. Aguacatán

Aguacatán was the municipality most affected by violence in south Huehuetenango. Again, geography played an important part in determining

which areas were hardest hit. Those villages and hamlets in the upper region of the Cuchumatán mountains which border on the municipality of Nebaj and a village which is near the municipality of Zacapulas were seriously affected.

The crops in this area were not harvested this year because of sporadic guerrilla activity still occurring. There are still displaced persons in this municipality and some health problems which are being attended to in Aguacatán and in an emergency health post.

There is a military post in Las Majadas and most people in the area intend to plant this year but they desperately need wheat seed and fertilizer.

There is also a need for some construction and roofing materials throughout the area.

The four villages most seriously affected by violence and in immediate need of assistance are:

1. Xenaxicul

Completely abandoned in 1982. About 200 people have returned in the past six months. No harvest was secured in 1983 and destruction of homes, supplies and school was widespread.

2. Caserío Cruz Chex

80 residents, 12 homes destroyed.

3. Las Majadas

Abandoned in 1982, half of residents (about 200 people) have returned in last six months. Many homes, school and Health Post destroyed. 28 widows living in village trying to support children. Harvest stolen by guerrillas and completely lost.

4. Llano Coyote

Population normal size (about 200 people) at least 20 widows with children - very poor harvest reported last year - considerable destruction of homes.

All four of these villages require immediate assistance in the form of food, seed (including wheat seed, a local cash crop), clothing, medical attention (malnutrition, parasites reported to be widespread), building materials.

5. San Rafael Petzal

Except for the burning of the municipal building and the destruction of

of records, there were no problems created by the violence. The municipality has good road access and good water.

6. Colotenango

Fear seems to have governed the lives of people here for the past two years. Investigation and questioning even of the Civil authorities is very difficult. Very little demographic data concerning the village of Colotenango was available.

The villages of Ical, Xemal, La Barranca, Tojlate and Tixel were seriously affected by sporadic attacks which resulted in homes being burned and men being killed. Exact numbers were difficult to obtain - the Health Post said 46 in total as a result of the violence. After investigation of La Barranca, we found 9 widows; 14 in Ical; 3 in Tojlate; 11 in Tixel. There is no assistance in this area for widows. Average number of children per widow is 5. Health personnel interviewed reported a high incidence of malnutrition, intestinal parasites; sarcopitosis and respiratory infections throughout the municipality.

Immediate assistance is indicated for the above communities in the form of food and medical attention.

7. La Democracia

Due to its proximity to the Mexican border, La Democracia was seriously affected by the violence during late 1981 - early 1982. There are still sporadic incidents of violent activity.

Here as in other municipalities, geography played a part in what areas were affected. The Selegua River runs through this municipality; those villages and hamlets on the north side of the river were severely affected and the foot bridges across the river destroyed. As a consequence of this destruction, the villages and hamlets on that side of the river have been abandoned.

People from those villages and hamlets not killed are reported to have fled to Mexico or the urban center of La Democracia. Many of them are still in La Democracia.

Except for the refugees living with families in La Democracia, this municipality is near normal and immediate assistance does not appear to be indicated.

8. San Sebastián Huehuetenango

San Sebastián was only slightly affected by the violence. The municipal building and records were destroyed. There are a few displaced persons who fled San Juan Ixcay. Their only problems are of a long term nature; i.e. water, schools, etc.

9. Santa Barbara

Santa Barbara was only slightly affected during the period of violence. The municipal records were destroyed and five men were killed in one village.

The overwhelming problem in this region appears to be extensive and severe erosion aggravated by grazing of sheep in the area. This is based on our observation as the people in the community did not perceive the erosion as a serious problem.

10. San Juan Atitán

In San Juan Atitán there were no deaths directly attributable to violence but there is a high level of fear in the community due to recent incidents. Because of this fear and suspicion, we were not able to get a reading on people's feelings, but we were able to verify our data.

In September, families normally migrate to the coast for two or three months. Because of Civil Patrol service, permission must be obtained for this migration and the Patrol decides (on the basis of need) who may go to the coast and who must remain to protect the village. As a result, many farmers have lost their cash income and are in need of fertilizer for the Spring planting.

Potable water in the municipality and villages of San Juan was reported as being the greatest need.

11. San Ildefonso Ixtahuacán

This municipality suffered sporadic violence throughout the area. There were no large confrontations but many diverse incidents in which two or three people died. Consequently, widows are scattered and it is difficult to get an accurate count of them.

The biggest effect of the violence has been the disruption of the agricultural cycle. The peasants need to migrate to the coast for money to buy fertilizer but they can't leave their villages because they are required to participate in PAC. As a result, they won't have money for the Spring planting. This seems to be a problem throughout the municipality but is worse in some areas.

There are approximately 200 widows in the municipality of whom at least half are due to violence.

The villages of Acal (population 1,743 people) and Papál (population 1,532 people) were reported as being the most severely affected in this area. Harvests in 1983 were very poor and an urgent need exists for food, widow and orphan assistance, and fertilizer which is essential for a successful 1984 crop.

12. Santiago Chimaltenango

Santiago Chimaltenango was only slightly affected by the violence. The municipal building and records were destroyed. They have a new Health Post which has not started to function yet, and problems with potable water in Santiago proper. No other immediate needs were indicated.

13. San Gaspar Ixchil

Although San Gaspar has some health, water and transport problems, it was hardly affected by the violence.

There are three widows in one village of San Gaspar.

Primary needs reported were credit and transportation of fertilizer.

14. San Pedro Necta

The Mayor's office did not have accurate knowledge of the situation in the villages. What information that was given, we were able to verify with the Health Post people who appeared to have more extensive knowledge of the communities.

They report that there are about 45 widows with children in the municipality and at least 10 families displaced. Accurate breakdowns were not available.

No specific data on immediate needs was forthcoming.

80% of the population is Indian.

15. Cuilco

This municipality has had very few problems caused by violence, (the Army permanently moved its troops out the day we arrived.)

Cuilco suffers mainly from inaccessibility. Only five of its 41 villages are accessible by vehicle. Four of these are accessible from La Democracia.

Only two villages were reported to have suffered from the violence in this municipality. They are:

1. El Cajón

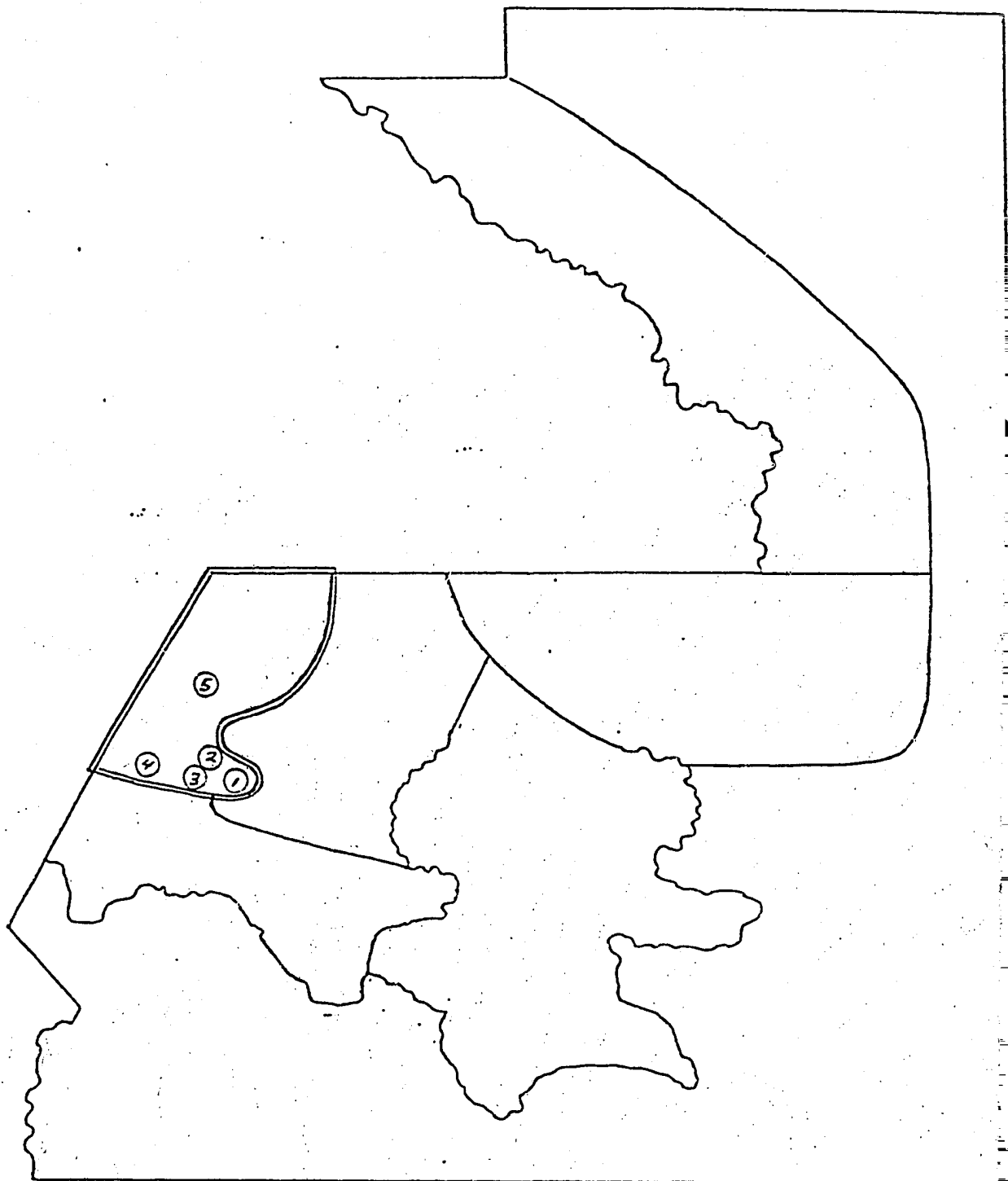
There was a violent incident one year ago and the hamlet was destroyed. Since it was a fairly new settlement, people do not believe it will ever be resettled.

2. Islam

In February of 1983, guerrillas came through the village killing five men, destroying two small bridges in the town and burning the only bus service in the community. Since the village is on the road to Cuilco, it can use the services of other bus lines. The bridges were re-built by the people of Islam.

Peasants in the area reported poor harvests and blamed the failure, in part, on the use of Mexican fertilizer which they consider inferior.

No immediate assistance is indicated in this municipality.



Summary: Zone 2
North-western Huehuetenango

MUNICIPALITIES SURVEYED:

1. Concepción Huista
2. Jacaltenango
3. San Antonio Huista
4. Santa Ana Huista
5. Nentón

MUNICIPAL SUMMARIES

1. Concepción Huista

This municipality has an approximate population of 9,575 inhabitants. There are roughly 2,000 people living in the urban center, with the rest being in the eight villages and 12 hamlets.

It appears that Concepción was not very affected by the violence even though one municipal building was destroyed two years ago. It has been completely rebuilt.

There is no military presence evident in this municipality, but there are approximately 800 Civil Patrol members.

At present, it is recorded that fifty-three people left the municipality in recent years and have not returned.

In the town of Concepción there are seven widows, yet they are not specifically "of the violence."

In regard to agriculture, recent harvests of corn, wheat, beans, coffee have been normal. Many people, however, have difficulty obtaining loans from BANDESA. 75% of the inhabitants do not own their land.

There are two public health posts, one in the urban center and another in Petatán, the largest village. Each is staffed with a single nurse. Primary illnesses reported are malnutrition and diarrhea.

Two of the greatest needs of this municipality are ^aletratinization and potable water. There are severe shortages of water during the dry season.

Many of the villages are without schoolteachers.

Roads to both Jacaltenango and Huehuetenango are unpaved and very rough, in some areas. Residents of the villages usually walk to San Martín (Todos Santos Cuchumatán) for transportation service. There is occasional traffic on the road to Jacaltenango.

2. Jacaltenango

This municipality has approximately 20,000 inhabitants with 6,133 people in the urban center and the rest living in the 19 surrounding villages. Although it has significantly been affected by the violence, most of Jacaltenango is almost "back to normal," as recent crops were only a little low and there has been much reconstruction.

The villages located near the Mexican border, on the road to Nerja, were especially hard hit by the violence. These include El Limonar, Ixcán, Laguna, and Nueva Catarina. Many residents of these communities fled Mexico, leaving certain areas completely abandoned. For example, approximately 66% of the population of El Limonar is still in Mexico.

4

Throughout the municipality there is a considerable number of widows and orphans of the violence. There was also a good deal of destruction over the past three years, yet much has been reconstructed, except for the border region.

At present, many institutions are actively operating throughout the municipality, including CRN, DIGESA, BANDESA, INAFOR, and Desarrollo de la Comunidad.

There are five health posts in Jacaltenango and a Maryknoll hospital in the urban center, which supplies health promoters for all villages. The most common health problems are malnutrition, diarrhea, measles, parasites. All health facilities seriously lack medical supplies and instruments.

Other major problems are the absence of sewage drainage in the urban center and the lack of potable water and letratinization throughout the municipality.

There is a very noticeable military presence in the urban center as a base is located in the middle of town.

3. San Antonio Huista

This municipality has a population of approximately 7,500 people. In the town of San Antonio Huista there are about 4,000 residents, with the rest of the population mostly living in the six surrounding villages. Two of these communities, Nojoyá and El Coyegual, were very affected by the violence. One hamlet of Nojoyá is completely abandoned and most of another one was destroyed. In both of these villages, there are 9-10 widows of the violence and many orphans.

Although there are still about 500 people who fled the region during the violence and have not returned, much has returned to "normal." Organizations such as BANDESA and ANACAFE are actively operating throughout the region and recent crops of corn, beans, coffee, and sugar were said to have been good.

Although there are health promoters operating in all but one of the villages, there is an extreme shortage of medical supplies and equipment throughout the municipality. The most common health problems are malnutrition, digestive disorders, and respiratory problems. According to health center officials, the greatest needs of the municipality are potable water projects, letratinization, and medical supplies. Each village has a school.

4. Santa Ana Huista

This municipality has a rough population estimate of 2,500 with 600-700 people living in the urban center. The 1981 census for the urban center was 1,200 inhabitants. It is evident that this region was very affected by the violence, as many people are still reported to be living in Mexico.

4

Two of the six surrounding villages, Ojo de Agua, La Montaña and Buena Vista, are completely abandoned. Throughout the populated village there are still many "missing" people who fled and have not returned.

At present, most residents of this municipality are afraid to work on land parcels which are distant from the villages. As a result, the plantings and harvests (principally coffee and beans) are considerably below normal.

Throughout this municipality there was a good deal of destruction of public buildings and houses. In the urban center, approximately 20 houses were destroyed, the municipal building, and the school. The municipal building has been reconstructed. The Health Center was completely sacked in January 1982 and remained closed until November 1982. All medical supplies and equipment were destroyed. At present, the health center is well staffed but there is a shortage of supplies. The most commonly reported health problems are respiratory diseases and gastrointestinal diseases.

While there is not a military presence in the urban center, the village of Agua Zarca has a large Army base. This village, located near the Mexican border, has a large population of 717 inhabitants. All but seven families have returned. In 1984, 31 refugees have also settled in Agua Zarca. Twenty-three of them are from the village Coyegual, San Antonio Huista. According to military officials, more refugees are expected to settle in Agua Zarca.

The most immediate needs of this village are a water supply and improvement on the badly deteriorated school.

A new village of Santa Ana Huista is Cuatro Caminos, located at the junction of the roads to Huehuetenango, Agua Zarca, Nentón, and San Antonio Huista. It was established by INTA and there are presently 100 houses.

5. Nentón

This municipality has approximately 12,000 inhabitants living in 25 villages and the urban center. There are 46 abandoned villages in the region. Because of the large size of this municipality, the Mayor's office and the Health Post were unable to provide complete information on present conditions. Therefore, we visited a number of villages, inhabited and abandoned, and met in the town of Nentón with Civil Patrol members from different areas. This was necessary in order to collect more precise data.

In order to clearly present this information, the urban center of Nentón will first be mentioned, followed by data on villages which were visited. Four villages that were not visited will then be discussed. This information comes from members of their Civil Patrols who were interviewed in town. Four other unvisited villages will also be mentioned, this information coming from the Mayor's office and Health Post. Finally, a list of abandoned locations will be presented.

4

Nentón (municipality)

The urban center of Nentón was seriously affected by the violence. It was completely abandoned between January 9, and August 15, 1982. 43 families have still not returned. Two of its hamlets and one can remain abandoned. The population of this urban center was about 1,800 over two years ago, but at present, there are between 800-1,000 residents.

Although there was a considerable amount of destruction, much has been reconstructed. One municipal building that was burnt down remains under construction.

A military destacamento is located in Nentón and a large base of Army engineers is located just outside of town. There are about 180 Civil Patrol members in this town. The Guardia de Hacienda officers also are very noticeable, as they have an office in the center of town.

The Nentón Health Center is well-staffed with eight personnel, but there is a serious shortage of supplies and equipment. The most commonly treated ailments are malnutrition, parasites, malaria, and some cases of tuberculosis.

This town is easily accessible by a good road.

According to the Comité Central de Acción Social widow/orphan program, there are 37 widows and 39 orphans in town. They are not exclusively a result of the violence.

VILLAGES:

1. El Aguacate

Approximately 50% of this village's normal population is presently living in the community. There are about 600 residents, while there used to be approximately 1,200 over two years ago. A large military presence is obvious, as there are about eighty soldiers based in this village. They appear to be very well-armed.

Over the past two years, much of the crops were lost due to bad weather. This includes their most recent planting in December 1983.

There is a serious shortage of both food and medical supplies. The military infirmary is of little assistance, as villagers have to go to the health posts in either Nentón or Gracias a Dios. Malnutrition is a major health concern and the lack of potable water is a serious problem.

According to the school teacher, there are two-three widows and six orphans of the violence. There are seven-eight families from near Yuxquen who have settled in this village because the military presence provides security.

The villagers are afraid to work on distant land parcels, particularly near Lake Yolnabaj. Some families are going to plant crops in Yalambojoch region.

This community is only accessible by foot and it is located 35 minutes from Yuxquen. It is roughly three hours and 15 minutes from Nentón, using a 4-wheel drive vehicle.

2. Canquintic

According to a 1983 census, there are 761 inhabitants of this village. There are still four families which fled that remain living in Mexico. According to residents, there was no destruction or death due to the violence.

Principal crops are corn and beans, but there are serious food shortages (especially in August and September.) Some villagers receive loans from BANDESA and "Técnicos Agrícolas" have visited recently (February, 1984.)

There is a functioning health post and a health promoter, but the nurse of the post visits infrequently. The most common ailments are malnutrition and amoebiasis. Two children recently died of malnutrition.

There are 160 members of the Civil Patrol.

A school exists, with three teachers.

The greatest needs are food, health services, clothing, and fertilizer.

Many villagers used to earn wages working in Mexico but they no longer travel across the border to seek employment.

Canquintic is not accessible by vehicle. It is 11 Kms. by foot from Ixcacao, or about 2 hours and 50 minutes walking time. This village is located at 1,800 meters altitude.

According to the Comité Central de Acción Social, there are nine widows and 23 orphans who are receiving food supplies as assistance. Residents of Canquintic say that none of these recipients are "victims of the violence."

3. El Carmen (hacienda)

This village consists of nine inhabited houses and four abandoned ones. Four families fled during the violence: two are in Mexico, one is in Guatemala, and one is living in Huehuetenango. The entire community was abandoned in 1983. One widow (of the violence) lives in El Carmen.

There are no health services or promoters in this village. Malnutrition is a major problem, as food supplies are their most immediate need.

The harvests of corn, beans, and sugar cane were good this past December-January. They will plant normally in May-June.

The La Reforma farm, which was a part of this hacienda, was completely destroyed during the violence. There was no other destruction reported.

El Carmen is located 16 Kms. from Nentón, just a short walk off the unpaved road.

4. Chacaj

This village is said to be inhabited by 38 families (167 inhabitants) and a large number of soldiers. A military base has been established here and families have been invited to settle in the region. INTA has been involved in the relocation of these people, as Chacaj is referred to as what will become a "model village." None of the original population is living in this village. They are reported to be living in Mexican refugee camps; El Chupadero and Delicias were the two locations mentioned (these camps are 4 Kms. from the border.) The original population was roughly estimated as 80 families. According to the settlers, 37 of the families are from San Mateo Ixtatán and one is from Bilil, village of Nentón. Although they do not have land titles, each is allowed to work approximately five cuerdas. Although Chacaj used to be privately owned, it is currently national property.

There are 35 children enrolled in school and there is one teacher.

There are no widows or orphans reported in Chacaj.

There was no harvest in 1983 because all of the settlers arrived after the planting season (May-June.) The villagers plan to plant this year. At present there are serious food shortages, including a major lack of corn.

Water is obtained from a nearby river. There is no potable water.

There is no government health post, but there is one health promoter (trained at the Maryknoll hospital in Jacaltenango) who has some medical supplies. Villagers must go to Nentón for serious health problems. The most common ailments reported are malnutrition and fever. Other sicknesses are also reported, particularly due to the relocation from cool, highland areas, to the hot, arid Chacaj region.

It appears that much of this village was destroyed. At present there is a great deal of construction planned and going on.

The government Public Health service has vaccinated residents. DIGESEPE is planning a fish-pond project in the village. DIGESA has provided some assistance in gardening.

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According to the residents, their greatest needs are food supplies (especially corn), clothing, and water containers, to carry water from the river.

The road to Chacaj (from Nentón) is unpaved and in very bad condition. It is 20 Kms. to Nentón, approximately five hours by foot. The Mexican border can be seen from the community, as it is about a 15-minute walk away.

5. Chanquejelvé

There are 104 families living in this community and only 2-3 that fled have not returned. About one-half of these families receive BANDESA loans and as a result, their harvests (corn, beans, coffee, sugar cane) last year were said to be quite good.

Although there are no reported widows and orphans of the violence, the Comité Central de Acción Social in Nentón cites that there are 34 orphans and 34 widows receiving assistance.

There are about ninety active members of the Civil Patrol.

There is a health promoter, but he has few supplies. The most common health problems are respiratory infections, malaria, and some tuberculosis.

According to villagers, their two greatest needs are potable water and a road. This village is located 4-1/2 Km. by foot from Ixcacao (one hour and 10 minutes), at an altitude of 1,430 meters.

6. Guaxacaná

The reported population of this village is 844 inhabitants or 124 families. It was not seriously affected by the violence, as there was no destruction and no widows/orphans.

The recent harvest was normal, although there is a problem with corn borer worms.

Malnutrition is a very evident, serious problem amongst the children. Two children died in the past month. There are no health services, no promoter, and no potable water. At present, (March), their well has dried up, forcing them to walk to La Trinidad (a farm) for water.

This village is only accessible in a 4-wheel drive vehicle.

There are 160 active members of the Civil Patrol.

7. Ixcacao

This village has about 154 inhabitants and none were said to have fled. In August 1983, 14 new residents arrived from the nearby El Bosque farm. These two families resettled in town and joined the Civil Patrol.

There were few effects of the violence here, as no destruction or widows "of the violence" were reported. According to the Comité Central de Acción Social in Nentón, there are three widows and five orphans in the village.

Last year's harvest of corn and beans was below average. This will be their second year collaborating with BANDESA and better results are expected.

There are no health services, promoters, or potable water.

Fever and malnutrition are the most commonly reported health problems.

Ixcacao is accessible by vehicle and is 2 hours on foot to Nentón.

The dialect Chuj of San Sebastián Coatán is spoken here.

8. La Laguna Chaquial

There are 174 inhabitants said to be living in this village, with two families that fled and have not returned. This community was noticeably affected by the violence, as three men were killed on May 1982, leaving behind three widows and seven orphans.

Last year's harvest was below average due to a lack of sufficient rainfall.

There are no health services, no promoters, and no potable water. Malnutrition is a major health problem.

There are 30 Civil Patrol members.

This village is located 14 Kms. from Nentón, a 45-minute trip in a 4-wheel drive vehicle.

9. El Limón Chaquial

This village has 26 families and none were said to have left due to the violence. There was no reported destruction or widows/orphans.

Last year's harvest was normal (corn, coffee, beans.) There are no health services, promoters, or potable water.

There are 45 members of the Civil Patrol.

This village is accessible only by foot, but it is 20 minutes from Ixcacao (accessible by vehicle.)

10. Las Palmas

The present population is about 680 people, with 4-5 families that left and have not returned. There are three widows of the violence.

the community was recently attacked in mid-March 1984 (no casualties).

There is a health promoter (with few supplies) and potable water. No health post, however.

Recent harvests were reported as normal and BANDESA has recently begun operating here. There is a great deal of malnutrition - very noticeable.

This village is located 34 Kms. from Nentón on a road that is only passable in a 4-wheel drive vehicle.

11. San José Chaquial (farm)

Only three inhabited houses, with residents arriving back in June 1983. They fled with the people of Nentón in 1982.

It is a small farm with one widow.

There was no harvest last year, but they have planted for this year.

This farm is accessible by vehicle.

12. Subajasún

This village has 997 inhabitants and no families fled. It was affected by the violence, as there are two widows (receive assistance from Comité Central de Acción Social) and the old school was partially destroyed.

Strong winds hurt last year's crops. A few residents receive BANDESA loans.

There are health promoters and potable water.

Malnutrition and fever are common ailments.

This village is located 8 Kms. from Ixcacao, accessible only by foot. It is 20 Kms. from Nentón, located at 1,650 meters altitude.

13. La Trinidad

This village has 502 inhabitants (or 80 families), but this is about 50% of the "normal" populations of 160 families. Approximately 80 families live in the following Mexican camps: Tziscaco/Santiago, Vertice/Colonia Obregon.

There are 14 widows of the violence and 54 orphans. This community has been hit very hard, as three were killed January 15, 1983; 11 killed April 9, 1983, and two killed December 20, 1983. The village was most recently attacked in mid-March 1984, but none were killed.

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Last year's crops were below average because there is a general fear of planting and working distant land parcels.

There is potable water, but no health promoters.

Malnutrition is a serious problem. Food supplies and clothing are the greatest needs.

This community is 32 Kms. from Nentón, accessible only in a 4-wheel drive vehicle (approximately 2-1/2 hours).

There are 130 Civil Patrol members.

14. Tzobjal

A 1984 census has the population listed at 342 inhabitants. Two families have not returned from Mexico. They currently report eight widows and 25 orphans. They receive assistance from Comité Central de Acción Social.

The harvest and plantings were reported as normal. There are no health services, promoters, or potable water. Malaria, fevers, and tuberculosis are common health problems.

Potable water and food supplies are their greatest needs.

This village is located 8.2 Kms. from Nentón. It is a 10-minute walk from the unpaved, rough road.

15. Yalisjau

There are 203 reported inhabitants of this village; ten families that fled are still said to be living in Mexico. There are two widows of the violence (receive aid from Comité Central de Acción Social) and one house was destroyed. The entire village was abandoned during a period of time in 1982.

Food supplies and clothing are their greatest needs. There is potable water and the health services of Nentón are nearby. The village is located very close to Nentón and is accessible in a 4-wheel drive vehicle.

Their harvest and plantings have been normal the past year.

16. Yuxquen

Although it is reported in the urban center of Nentón that this village is abandoned, such is not the case. The original population was roughly estimated to be between 60-100 families. At present, there are three families, 17 inhabitants.

This village was hit hard by the violence and completely abandoned.

Over 30 houses were destroyed. The population is said to be living predominantly in two Mexican camps: Benito Juárez and Cuauhtemoc.

All crops were lost last year, but some planting has begun. The present residents are very frightened. These families returned on December 8, 1983.

This community lacks everything.

VILLAGES NOT VISITED

The following information was provided by the Civil Patrol representa

1. Jom Tzala

It is reported that about 420 people live here, with six families still living in Mexico. It was affected by the violence, in that six houses were destroyed and there are nine widows of the violence (the CCAS aids a total of 12 widows and 32 orphans.) Furthermore, it was said that 16 men were killed in recent years. The last attack was in August, 1982.

There are no health services, potable water, or promoters.

Last year's harvest was low.

Measles, respiratory infections, and malnutrition are the most common health problems.

This village is located 3 hours by foot from Nentón. Both Chuj and Kanjobal dialects are spoken.

2. Quixal

Sixty families are reported to be living here. Although there was no destruction, there are two widows of the violence (receive aid from CCAS.)

Last year's crops were good and they will plant normally this year.

There are no health services or promoters. They do have potable water. Fever, diarrhea, and malaria are the most common health problems.

According to residents, their greatest needs are food, clothing, medicine, and a new bridge across the river (which divides the village).

The village is one hour by foot from Nentón.

3. Xoxtal

This information may not be very reliable, as the village representatives had trouble speaking and understanding Spanish. They reported 65 families living there, or about 300 people. Eight families fled and have not returned.

There were no major effects of the violence, in that nothing was destroyed and there are no widows/orphans.

Last year's harvest was below normal.

There are no health services, promoters, or potable water.

Food supplies were said to be their greatest need.

This community is located three hours by foot from Nentón.

4. Paluá

According to the Mayor's office and the Health Post in Nentón, this village has never or does not exist. However, the Director of the Civil Patrols for all of Nentón, notified us that they exist and were coming in to visit.

Approximately 40-50 families live in Paluá. The village was completely abandoned in 1982, but residents returned in 1983 to form a Civil Patrol. They claim that there was no destruction and no widows and/or orphans.

Bad weather caused last year's crop to be poor.

There are no health services, promoters, or potable water. The major health problems include malnutrition and diarrhea.

They said that their greatest needs are weapons (they are completely unarmed), food, and health services.

This village is located 8 hours by foot from Nentón, but only one hour (by foot) from Jolomquisis.

VILLAGES NOT VISITED

B. Information from Mayor's office and the Health Post in Nentón.

1. Bilil

Approximately 70-75 families. Only a few families living elsewhere. Not accessible by vehicle.

2. Cajtavi

Approximately 80-85 families; some are still residing in Mexico. According to a Mexican report, this village was completely destroyed by the Guatemalan Army (false.) Accessible by vehicle.

3. Chaculá (farm)

Few residents. Some killed; some fled. Owner has hired "outsiders" to protect the cattle.

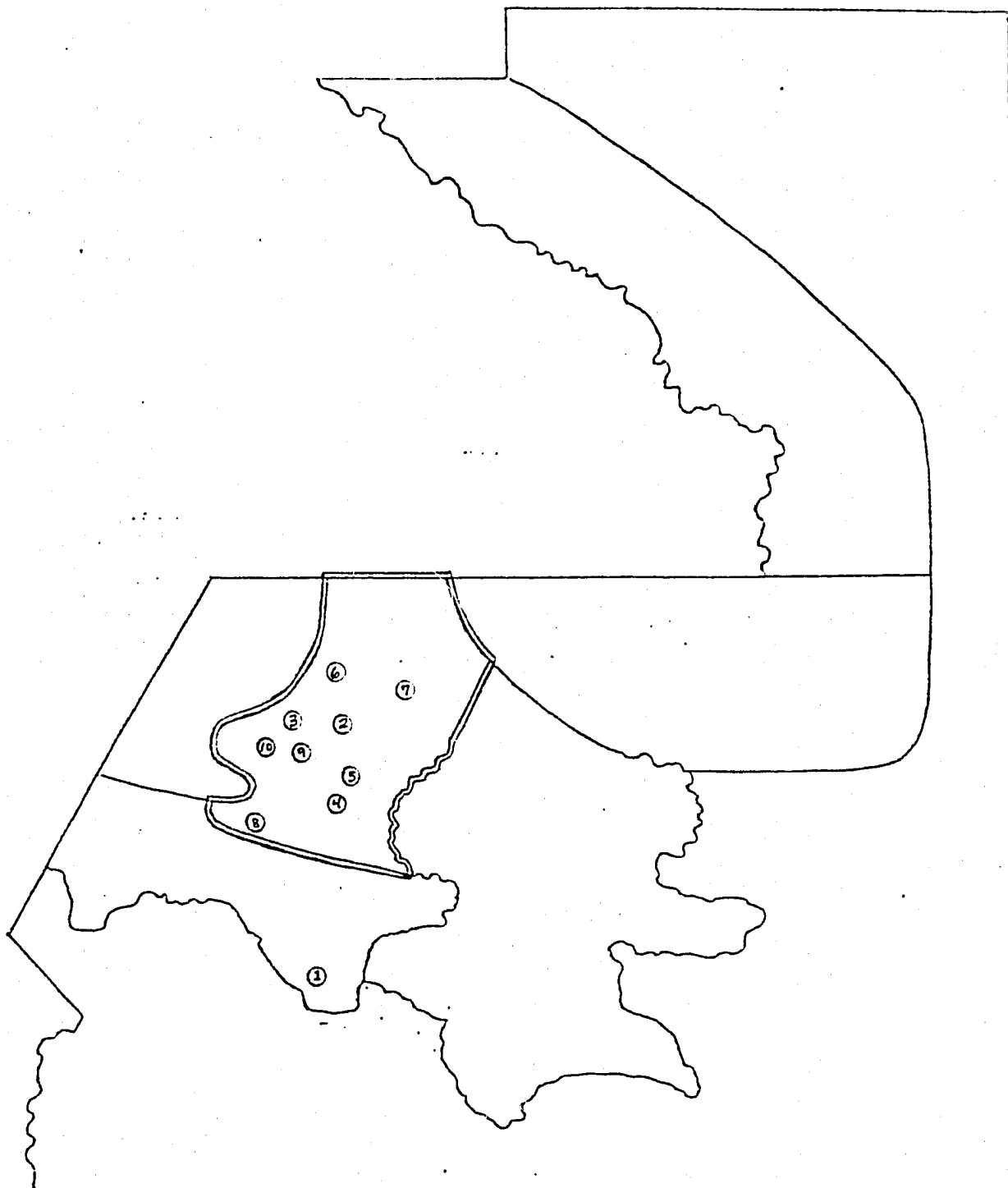
4. Gracias a Dios

Approximately 70 families. 15 families of Jehovah Witnesses fled to Mexico because they refused to bear arms and serve in the Civil Patrols. A military base is located here.

ABANDONED VILLAGES

1. El Aguacate (farm)
2. El Campamento (hamlet)
3. Campo Alegre (hamlet)
4. Candelaria Siete Pinos
5. Cantarrana (farm)
6. El Carmen (farm)
7. La Ceiba (hacienda)
8. El Ceibón (farm)
9. Chaculá Viejo (farm)
10. La Cienaga
11. Cipa (farm)
12. Las Delicias (farm)
13. La Libertad (farm)
14. La Libertad (hacienda)
15. La Memelita (hamlet)
16. Miramar (hacienda)
17. Nueva Esperanza (hamlet)
18. Ojo de Agua (village)
19. Ojo de Agua (farm)
20. El Olvido (farm)
21. Potrero del Morro (farm)
22. Pozo Hediondo (hacienda)
23. Puente de Tierra (farm)
24. Puente Quemado (hamlet)
25. El Quetzal (farm)
26. La Reforma el Carmen (farm)
27. Salamay
28. San Antonio (farm)
29. San Francisco (farm)
30. San Miguelito (hamlet)
31. Santa Rosa (village)
32. Santa Teresa (village)
33. Saquisbaj (farm)
34. Siete Pinos (hacienda)
35. Tintul Siete Pinos (hamlet)
36. Tunalito El Espino (farm)
37. Tzalá Grande (hamlet)
38. Tzalá Chiquito (hamlet)
39. La Union
40. Las Violetas (farm)
41. Yalambojoch (village)
42. Yalcastan-Buena Vista
43. Yalisjau (farm)

- 44. Yaltoyás
- 45. El Zapotal (hacienda)
- 46. Santa Elena



Summary: Zone 3.
North-East Huehuetenango

MUNICIPALITIES SURVEYED:

1. Malacatancito
2. Santa Eulalia
3. San Sebastián Coatán
4. San Juan Ixcoy
5. San Pedro Soloma

6. San Mateo Ixtatán
7. Santa Cruz Barillas
8. Todos Santos
9. San Rafael La Independencia
10. San Miguel Acatán

ZONE SUMMARY

In overview, the entire zone was heavily affected by violence during the period of November 1981 and February 1982. Although the incidence of violence has greatly diminished (if not altogether disappeared), there appear to be needs of an immediate nature throughout the zone but principally in the municipalities of Barillas, San Mateo Ixtatán, San Miguel Acatán, San Rafael La Independencia and Todos Santos.

The majority of people in these areas are Indians. According to reports almost all of the Ladino (mestizo) population sold their property and goods prior to leaving.

One of the principal problems reported in this zone is the high number of widows with children. Conservative estimates place the number of widows at well over 1,000 and the number of children at between 3 - 5,000. The victims are still suffering a severe lack of food, clothing, medical attention and housing. It was reported that the majority of these women are attempting to work the land for sustenance but their efforts are not generally successful and cannot possibly meet the needs of their families.

Health services in the entire zone are either hopelessly deficient or totally non-existent. Whatever health personnel were in the area during the period of violence were either scared off or assigned to the city of Huehuetenango for their protection. Efforts to re-assign health personnel to the municipalities (where the only health posts are located) were met with resistance and many resignations. Personnel who are willing to work in the zone do so only for periods of three months or less. As a result there is no continuity of service and no chance for extended programs of health orientation or treatment.

Additionally, medical supplies are issued to the few functioning health posts only on a 3-month basis. This supply barely lasts 2-4 weeks and has even been reduced recently due to Ministry of Health budget cuts.

Rural health promoters were reported to be active in the zone but they are minimally trained and almost totally un-equipped. Their presence could be used as a distribution network for assistance but at present are making no impact on the serious health problem of this zone.

Lack of potable water is a serious and immediate need throughout the zone. Intestinal parasites from contaminated water sources was consistently reported as a major problem by our informants.

Agriculturally, the zone has suffered considerably in the past two years and continues to do so. Crops, when harvested, are generally of a low yield for a number of reasons. 1) Due to the small size of most communities and limited available manpower, Civilian Patrol service can require as much as a full week per month of a farmer's time. This interrupts crop maintenance and prevents his seasonal migration. Cash income is seriously lowered or totally eliminated and he is therefore unable to purchase agricultural supplies such as improved seed, fertilizer, etc. 2) The lands surrounding some of the municipalities are mountainous and

often of poor quality for agriculture. Many of the local farmers used to plant on more fertile lands some distance from their homes but are no longer able to do so because of fear of violence in the more fertile lowland areas of Huehuetenango. They are also restricted from normal migration patterns by the Civil Patrol service.

Immediate relief assistance is indicated throughout the zone, particularly in the municipalities mentioned above and most specifically for the widows and children left as victims of the period of violence. This assistance according to our data, should be in the form of food, proper clothing, agricultural supplies and technical assistance, medicine and trained health personnel.

MUNICIPAL SUMMARIES

1. Malacatancito

The municipality of Malacatancito has a population of 9,400 people living in 15 villages.

This area was one of the least affected by the violence. The town of Malacatancito is easily accessible from the main highway and suffered destruction of the municipal building (which has been reconstructed) and of the Pucal bridge which has also been repaired.

No immediate assistance is indicated in this area.

2. Santa Eulalia

The municipality of Santa Eulalia has a population of 18,000 people divided among 17 villages.

It suffered only sporadic episodes of violence of which there are few signs left in the area. It suffers mostly the lack of services that affects the entire zone. Here too health services are non-existent in the villages and insufficient in the municipality itself.

3. San Sebastián Coatán

The population of this municipality is 11,346 and it comprises three villages.

The town of San Sebastián is 3-1/2 hours by foot from the nearest bus service and is located in a valley with an extremely scattered settlement pattern, i.e. three villages and 65 hamlets.

Major problems encountered here were:

- lack of transportation

- inability of the people to plant their lands in the Nentón area
- the cooperative (agricultural) has no money with which to service its people

No immediate assistance is indicated in this area.

4. San Juan Ixcoy

San Juan Ixcoy comprises 10 villages with a total population of 10,388.

The town of San Juan has a "health post" and benefits from several government programs. "Community Development" (a government entity) has an office in San Juan which helps coordinate government and other services, principally in the area encompassing the municipalities of San Juan Ixcoy, Santa Eulalia and Soloma.

The municipality of San Juan Ixcoy was very lightly touched by the violence and immediate relief assistance, other than medicines and health personnel is not indicated here.

5. San Pedro Soloma

San Pedro Soloma has 20 villages with a total population of 23,000.

San Pedro is a center for commercial activity for this area along with Barillas. Correspondingly, it is well serviced by government agencies.

It has a "Centro de Salud" covering San Juan and Santa Eulalia as well. We are told that medical services are non-existent in the village and the Centro here is simply chronically short of basic medicines.

6. San Mateo Ixtatán

San Mateo has a population of 23,626 people, comprising 20 villages and the municipal center. Most of San Mateo has rugged high mountain country and very poor agricultural land, except for the river valleys. Its communities are among the most traditional and isolated in the region.

Geographically, three areas within the municipality were severely affected by the violence from 1981 to 1982.

- Area 1. The town of San Mateo and its hamlets suffered great losses. There are over 150 widows here. Malnutrition is endemic but exaggerated especially in the children of the widows. Health problems are serious and continue despite having a "health post" and the Maryknoll Parochial Clinic in San Mateo proper, a typhoid epidemic took well over 100 lives just four months ago.

There is also a serious land problem here. Many of the people from this area used to farm lowland parcels elsewhere. Fear and their duties with the Civilian Patrol prevent them from doing so now. Added to this is the fact that people are too poor to buy enough fertilizer for a normal crop on the land they do farm. The result is a significant reduction in the level of nutrition. In addition, large tracts of irreplaceable forest have been burnt off to make room for food crops.

Area 2. In the valley leading down from San Mateo to Sebepe, there exist numerous groups of widows living in several villages. In this area, the hamlet of Petenac (village of Guáisná) was completely destroyed and its people massacred in the summer of 1982.

Area 3. In the lowlands, the villages of Yalarquitz, Nueva Concepción, Ixcuchin and Ixcatzán were abandoned but are being repopulated mostly with internal refugees from other areas.

The villages of Llano Grande, Río Seco, El Poblado and Finca El Triunfo, are still abandoned. During the violence, several villages experienced massacres and other villages were abandoned out of fear. Most of these people are refugees in the Mexican camps just across the border.

RECOMMENDATIONS

The widows and orphans in areas 1 and 2 should be given priority. They are in urgent need of food and clothing. (NOTE: appropriate clothing for the women and girls or the raw materials to produce it themselves.) In the long term, these women need some form of employment preferably some craft they can do in the home.

People in areas 1 and 2 need better access to fertilizer.

The lowland area needs, we can only guess at. It is being slowly resettled at the moment. However, if the many land owners in the Mexican camps return suddenly, we know this will be an area of great need.

Finally, as in all the other areas, more medicine and better health services are urgently required in the villages.

7. Santa Cruz Barillas

The municipality of Barillas normally has a population of 45,000. Today, there are less than 40,000 people. The town of Barillas is the gateway to the rich coffee and cardamon producing northern lowlands of Huehuetenango.

Barillas is divided into two areas; the highlands to the south, and the lowlands in the north.

The highland areas of Barillas were lightly touched by the violence with the exception of two aldeas. Puente Alto and Ballí were completely abandoned after massacres there but Ballí is now partially repopulated. Our estimate is that there are 500-800 widows with children currently residing in the municipalities and its villages.

Most of the violence occurred in the lowland region north of Barillas. Areas close to the border still suffer occasional activity. During the worst of the violence, more than half the settlements were abandoned in this area and many remain so to this day. Communication in this area is almost entirely by footpath.

According to reports, the Army has been coordinating the return of people to these abandoned villages. The settlements are generally being repopulated with a mixture of original residents and new settlers from other areas. This may contribute to the confusion when the 3-5,000 refugees living in Mexico are repatriated.

One difficulty in assessing this area is the fact that major crops are cash crops; coffee and cardamom. These don't need to be replanted every year, simply fertilized and weeded. There is also the tendency of many people in this area to be migratory, having secondary affiliation with other towns. These factors make it hard to determine the relative problems of displacement and resettlement here. For these reasons, we have no recommendations for the lowland area pending further, in depth assessment.

The northern highlands, however, require immediate assistance, particularly to widows and children in the form of food, clothing and medical aid.

8. Todos Santos

Todos Santos has a population of 12,130 people comprising eight villages.

Several instances of violence affected Todos Santos and the neighboring village of El Rancho, but today, few signs of the disturbances are evident.

The Ladino (mestizo) population abandoned the area permanently but the displaced indigenous population, has almost totally returned.

Todos Santos, El Rancho, Chiaval and Chemal registered the greatest displacement of people and also the highest number of widows and orphans. In El Rancho there are still 15 destroyed houses.

As in other areas, health services are non-existent in the village. We were informed by Health Post personnel that their quarterly supply of

medications are quickly exhausted often in less than one month. Patients are often referred to the Behrhorst Clinic in Chimaltenango.

In this municipality the most needy group is widows and orphans assistance in the form of food, clothing, housing, medical attention sources of work should be considered.

9. San Rafael La Independencia

This municipality comprises approximately 12,000 people living within the urban center and 14 villages.

This area was moderately affected by the wave of violence between late 1981 and mid 1982. Most of the action appears to have occurred along the San Miguel Acatán - San Rafael road.

Within the urban center, the municipal building, school, community center and post office were all destroyed by guerrillas and to date have not been rebuilt.

The village of Lajcholaj was heavily affected in late 1981. A total of 47 people were killed there, and to this date at least 24 widows with children are living among 98 families.

Displaced persons were noted in six of the 14 villages as well as in the urban center of San Rafael. The most common causes reported for this movement were massacres, destruction and fear.

In San Rafael proper we observed a group of 80 widows who had gathered at the request of the Mayor to register for possible future relief and assistance. It was not difficult to note that this group of people does indeed require immediate assistance, particularly in the form of food and medical attention. Advanced levels of malnutrition among the adults as well as the children were evident as were severe widespread occurrence of skin infections.

As in other regions visited, health services on the village level are non-existent. The urban center of San Rafael has a health post but it is staffed only by one auxiliary nurse with few medicines and no transportation.

A local social and reconstruction committee, comprised of army and civil authorities, has developed a rudimentary relief assistance program in the area. Minimal rations of food are distributed quarterly to widows and orphans in the municipality but our observations indicate that this assistance by no means satisfies the immediate needs of the people.

We recommend that this area be considered for immediate attention in the form of food, medical assistance, work sources, construction materials and potable water.

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10. San Miguel Acatán

The municipality of San Miguel Acatán has 15,837 people comprising 22 villages.

This area was greatly affected by the migration of people during violence. The valley leading from Coyá down to the Nentón area was the most greatly affected and in the urban center of San Miguel, the municipal buildings were burnt as were several houses, 26 of these remain destroyed to this day. There are also many families from 13 villages who are living with relatives in San Miguel at night and working their fields by day.

The hamlets Petanchim and Mujuval from the village of Ixcuyucán are completely abandoned.

The village of Coyá suffered a massacre on 18 July 1981 and the villages of Poza and El Mul also suffered significant losses of population.

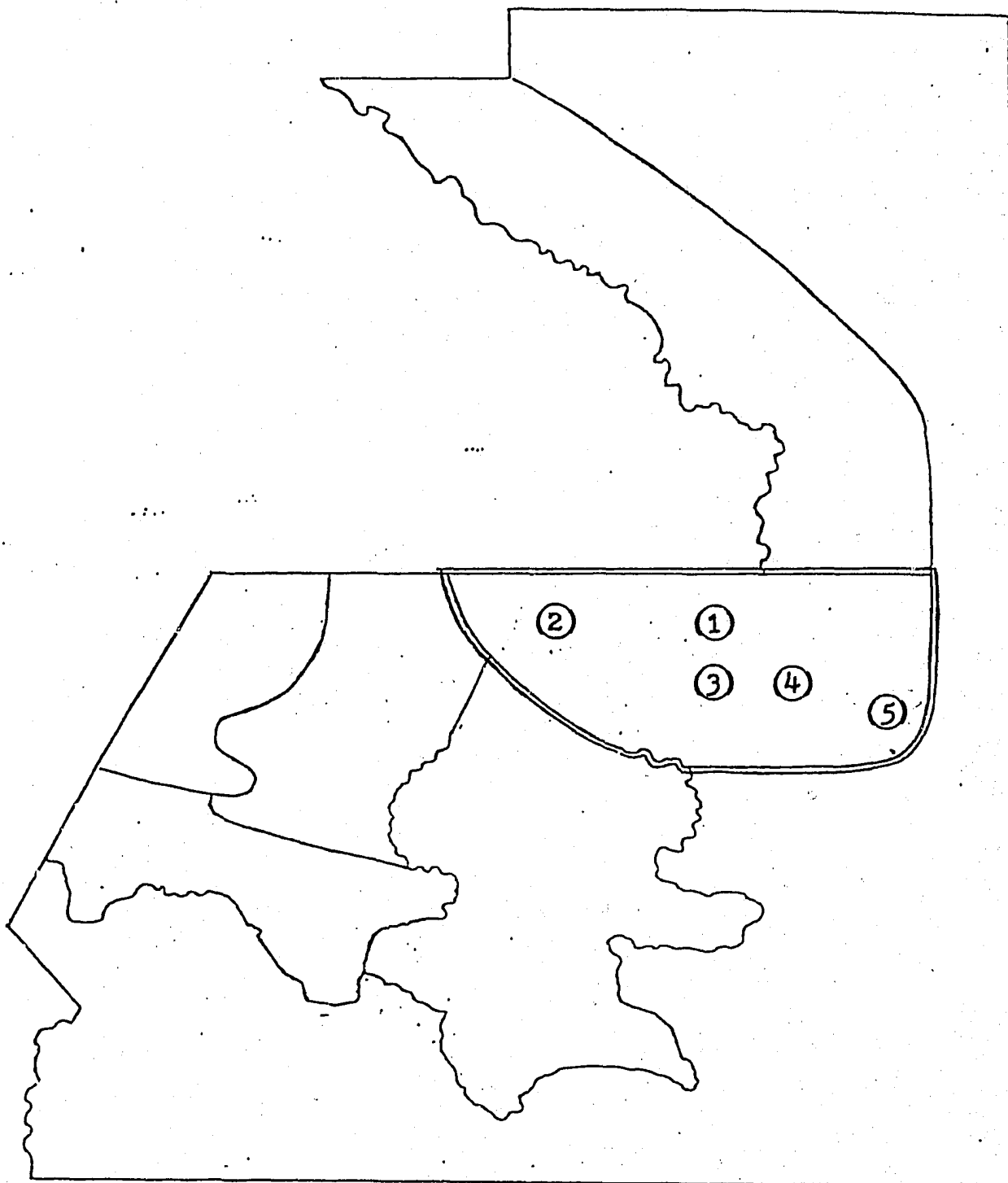
There are five widows and 36 orphans from these areas, listed with the municipality. Reports indicate that people fled the area because of massacres and fear between June and September 1981.

The people of this area have harvested during the last year. However, they have not been able to work their lands in other municipalities such as Nentón, Barillas and San Mateo out of fear and restricted travel.

The most severe problems in the area are: the terrible situation of the widows and orphans; lack of medical services in the villages, malnutrition, potable water, communication and lack of work. The Army is giving some aid to this area but it is insufficient.

Of immediate importance are:

1. The creation of jobs, especially for the widows.
 2. Improvement of medical services especially to the villages where services are non-existent.
 3. The widows and orphans in this area are in critical need of basic foods and proper clothing.
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Summary: Zone 4
Playa Grande

MUNICIPALITIES AND CAMPS SURVEYED

1. Playa Grande (Army base/municipal center)
2. Xalbal (camp)
3. El Rosario (camp)
4. Las Conchas (camp)
5. Chisee (municipal center/camp)

I. DESCRIPTION OF ZONE

The zone of Playa Grande extends from the northeast corner of Huehuetenango through northern Quiché and into northern Alta Verapaz.

The approximate population of this area is 40,000 people.

In the early 1970's the Guatemalan government started a settlement project in which a large portion of the historically uninhabited zone of Playa Grande became populated with people from all over the country. Late in the 1970's the area began experiencing the effects of guerrilla activity as did the rest of Guatemala. The severe lack of communication and accessibility to the communities of Playa Grande greatly aided the guerrilla effort in establishing itself within the zone. Because of the escalating conflict, most people were forced to abandon their homes in 1981. Many residents fled to Mexico while the rest were forced to survive in the jungles wandering from place to place.

With the complete amnesty and protection by the Army offered by the Ríos-Montt government which came into power in March 1982, people began to return to communities and resettle in army-secured areas. Since that time, the zone of Playa Grande has enjoyed a period of relative tranquility and rebuilding. Life in the region for the most part, has normalized considerably and visible effects of the past violence are few.

Presently, Playa Grande is composed of a variety of population groups. There are many inhabitants from the western part of the country who arrived in the early 1970's settlement project. There is also a very large population of Kekchi speaking people. Other groups represent smaller percentages of the entire Playa Grande population. Parts of Playa Grande have been heavily exploited for crude oil. As a result, there exists a network of roads and small communities throughout the region.

Playa Grande can be divided into four sub-zones: Project 520, north, south, west and Chisec. Project 520 is a settlement project just north of the town of Playa Grande. This sub-zone experienced little effect from the violence. South Playa Grande is characterized by private farms and is accessible, for the most part, by the Chixoy River. West Playa Grande is mostly composed of totally isolated communities accessible only by air or foot. This sub-zone contains many still-abandoned communities. Chisec, east of the town of Playa Grande, is the only municipality in the area and has approximately 125 communities. South Playa Grande, West Playa Grande, and Chisec were all greatly affected by the recent violence. Most of the people in Playa Grande are farmers. Food crops cultivated include corn, beans and rice. Cardamom is grown in great quantities as a cash crop throughout the region.

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II. ZONE BREAKDOWN

a) Project 520

The sub-zone of Project 520 is located to the north of the town of Playa Grande. This sub-zone shares its northern border with Mexico, covers 500 square kilometers and has a population of about 10,317 people. Project 520, which contains some 43 communities ranging in size from 47 to 926 inhabitants, is a settlement project directed by INTA (figure according to INTA sources.) Settlers arrived at Project 520 from all over Guatemala but the majority are from the western part of the country or from Kekchi speaking areas. Much attention by the Guatemalan government has been focused on project and, for this reason, many institutions are working there. Most of 520 is accessible by dirt road although transportation on these roads is very limited. The major crops grown in the region include corn, rice, and beans, unfortunately, the quality of the soil within the project is poor. This tends to lead to depressed crop yields and heavy dependence on chemical fertilizers and advanced technology.

The sub-zone of Project 520 was not badly affected by the recent violence. Disruption in planting and harvesting cycle was minimal as was destruction of homes and population displacement. At present, the area of Project 520 is very stable and there is no emergency need of resources.

b) South Playa Grande

The sub-zone of south Playa Grande is made up mostly of private farms. Most areas are accessible by the Chixoy River, by foot or air. To date, there is no road system servicing this sub-zone. The main crop of the area is cardamom. Corn and beans are cultivated as food crops. This sub-zone was somewhat affected by the recent violence and most communities were destroyed and forced to evacuate at one time or another. There now exist two displaced persons camps in south Playa Grande. The camp in Las Conchas contains 696 people and the one in Rosario contains 618 (see Section III), although the sub-zone was affected, recovery has been fairly complete and there presently exists no emergency need of resources.

c) West Playa Grande

The sub-zone of west Playa Grande includes a large area of jungle in northern Huehuetenango and northern Quiché. No road system exists in the area leaving almost all communities accessible exclusively by air or foot. Corn, beans, and cardamom are exclusively cultivated in this region. The west sub-zone was especially hard hit by the recent violence, and recovery has been slow due to the lack of communication and

transportation. The majority of communities had to evacuate and destruction of buildings and crops was severe. Many communities are still completely empty. Resettlement of this sub-zone has been gradual and includes people from surrounding regions who did not necessarily live there before. It is conjectured by the Guatemalan government that when the refugees begin to flow back into Guatemala from Mexico they will try to resettle in the sub-zone of west Playa Grande. This area is still experiencing conflicts between guerrilla and government forces although it is considered to be relatively secure. There exist no emergency needs in the west sub-zone, but it is here that the most long term needs for resources occur.

d) Chisec

The sub-zone of Chisec comprises the eastern most portion of the Playa Grande zone and contains approximately 26,000 residents. Main crops include corn, beans, rice and cardamon. In 1981, Chisec was completely destroyed and all its inhabitants were forced to abandon their lands. However, in October 1982 relief efforts began to reach the displaced population in this sub-zone. Since that date, this region has enjoyed much attention and assistance and, for the most part, reconstruction has been completed.

No emergency situations exist in Chisec at present.

III. DISPLACED PERSONS

a) Las Conchas

The displaced persons camp of Las Conchas began to form in the beginning of December 1983 when 39 people arrived at the military base asking for help and protection. The camp is accessible only by helicopter, small plane or foot. There are now 696 inhabitants living in Las Conchas and all are completely supported by the Army which has provided food, shelter and medical attention. Presently, there are 16 widows and 22 orphans living in the camp. The residents of Las Conchas arrived from three communities located on private farms near the military base. According to the civilian authorities of the camp, the most urgent need of the residents is to return to their lands so that they can re-establish their lives. The Army wants to relocate the displaced people but not to the area from which they originally came. The reason for this is that the land to which they want to return is privately owned with no possibility of the people's gaining ownership. The Army has tried unsuccessfully to negotiate with the farm owners and thus want to relocate the Las Conchas residents to another part of Playa Grande where they can receive land titles. One possibility exists, to move them to the community of Xalbal where

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the Army is attempting to start a resettlement project to confront the entire displaced persons problem of Playa Grand. The people of Las Conchas are healthy and ready to move out of the camp. The community also has some money it can use to help relocate itself.

b) Rosario

The history of the displaced persons camp of Rosario is very similar to that of Las Conchas. Presently, there are 618 residents of the camp including 27 widows and nine orphans. All of the displaced people have arrived from communities near Rosario and, like Las Conchas residents, were living on private farm lands. This camp is accessible by helicopter, small plane, foot and boat. These people also came to the military base to ask for help and protection. They have been provided with food, shelter and medical attention by the Army. Like Las Conchas, there is no life-threatening need for resources; perceived by the residents of Rosario is the need for credentials and rifles. Like Las Conchas, there exists a large potential problem in that the Army is supporting a big population and may have trouble doing so in the very near future. The residents of both camps are completely dependent on outside help and it is crucial that they be supported until they can be relocated and support themselves again. Although some residents of Rosario expressed that they wish to remain there, most want to move to other lands. Here too, the Army is considering a move to Xalbal so that they can become landowners and not be dependent on large farm owners. Like Las Conchas, people in Rosario produce cardamon from the surrounding jungle and sell it for cash. For this reason, Rosario residents also have money to help relocate themselves.

c) Xalbal

Presently, there are 162 displaced persons living in the camp of Xalbal. Here too, the Army completely supports the population with food. Unlike the other two camps of Las Conchas and Rosario, the housing found in Xalbal is grossly inadequate. Most shelters have a roof, but very few have any walls. Residents are completely exposed to the elements and, for this reason, are experiencing a high incidence of malaria and respiratory diseases. There is a small health post within the camp operated by a technician from the Ministry of Health but very little medication is available to him. It is in this community that the Army is considering a resettlement project. The region surrounding Xalbal is government owned and therefore can be distributed so that residents can have more than an adequate amount of land to support themselves. The only emergency need that exists in Xalbal is housing. The Xalbal resettlement project will be discussed further in Section V.

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Since March of 1982, the Guatemalan government has provided the security and resources needed to re-establish normalcy in the Playa Grande zone. With the aid of the National Reconstruction Committee and other government agencies, the Army has distributed food to many communities and has completely supported some populations which could not maintain themselves otherwise. The Army has also provided health services to those communities which demonstrated an urgent need for assistance. With military security provided to the region, people re-started their normal cycles of planting and harvesting. The Army provided much of the planning and infrastructure required to re-establish the communities of Playa Grande. To date, the only available transportation to some communities is by Army helicopter. Playa Grande, in general is plagued by severe communication and transportation problems. Only a handful of communities are accessible by road though some communities can be reached by the river system. The majority of communities are accessible only by helicopter, small plane or foot. Telegram service goes only as far as the town of Playa Grande and the only other means of contact with most of the communities is by Army radio.

Presently, most Guatemalan government institutions are operating in the region. These include: INTA, CRN, BANDESA, Desarrollo de la Comunidad, SNEM, and others. Private organizations operating in the area include CARE, Medicos del Mundo and the Evangelical Mission of Central America. Before the violence, Playa Grande was fairly well covered by the Ministry of Health. There existed an extensive network of health posts and medical services. Now there is one health center in the town of Playa Grande, one in Chisec and six health posts in various communities. The center in Playa Grande attended 16,154 patients in 1983 and reported that malaria, anemia, malnutrition and intestinal parasites were the most prevalent health problems.

Playa Grande faces a unique problem in that it shares a long border with Mexico where five large refugee camps are reported. Although the situation is stabilizing in Playa Grande presently, a large influx of homeless people would pose a difficult problem. Much of Playa Grande's border area is still abandoned and it is believed that soon a flood of people might return to reclaim the lands they abandoned some years ago. According to INTA guidelines, however, land that is abandoned for more than one year, automatically becomes property of the government. Refugees returning from Mexico to regain their property will find that they have no legal right to do so and will be forced to resettle elsewhere. The potential magnitude of this problem is staggering and must be taken into consideration.

IV. RELIEF EFFORTS

The majority of relief activities which have taken place in the zone of Playa Grande can be attributed to the Guatemalan Army. Although the Army itself has not supplied resources from its own warehouses, it has been responsible for procuring and distributing goods and services from other Guatemalan institutions. Almost all of the communities which the Army supports can only be reached by helicopter which is the vital link between these communities and the outside world. A representative list of goods and services distributed by the Army is attached to this report.

The organization CARE is working in the sub-zone of Project 520 and is conducting three programs. The first is a cardamon cooperative program. Communities involved in this project receive technical assistance in addition to dryers constructed to process the cardamom. The second CARE program is a community development project called "La Mujer, la Salud, y Desarrollo Rural" (Women, Health, and Rural Development.) The project provides latrines, stores, pharmacies and educational programs. It is expected to last three years and includes 36 communities. CARE has also conducted a third program, food-for-work. This has included all the communities of Project 520 and is expected to terminate in June 1984.

The evangelical mission of Central America is supporting the community of Buen Samaritano by supplying food, shelter and medical attention. In the sub-zone of Chisec, a French organization named Medicos del Mundo is providing medical assistance. There are no other private organizations working in the zone of Playa Grande.

V. SUMMARY AND CONCLUSIONS

Except for the sub-zone of Project 520, all of Playa Grande was greatly affected by the recent civil violence. Not only were entire populations displaced, but also there was much destruction throughout the zone. Recovery has taken place to varying degrees although there are some communities that are still suffering a great deal. There exist no emergency situations at present.

The sub-zone experiencing the most problems today is west Playa Grande. Most of the difficulties result from the almost nonexistent routes of transportation and communication. Most communities in this area are virtually isolated and depend on helicopters and small planes to bring them the resources they most urgently need. The level of health, nutrition, and housing is severely depressed in the west Playa Grande sub-zone and will not rise until large quantities of assistance are pumped into this region.

The severe problem of displaced persons in Playa Grande is clearly demonstrated by the presence of 1,476 displaced people in three

camps: Las Conchas, Rosario and Xalbal. Although the residents of these camps are receiving food, medical attention, and housing (excepting Xalbal) from the Army, there is no guarantee that this will continue in the future. The potential problem of nearly 1,500 people without relief support cannot be ignored.

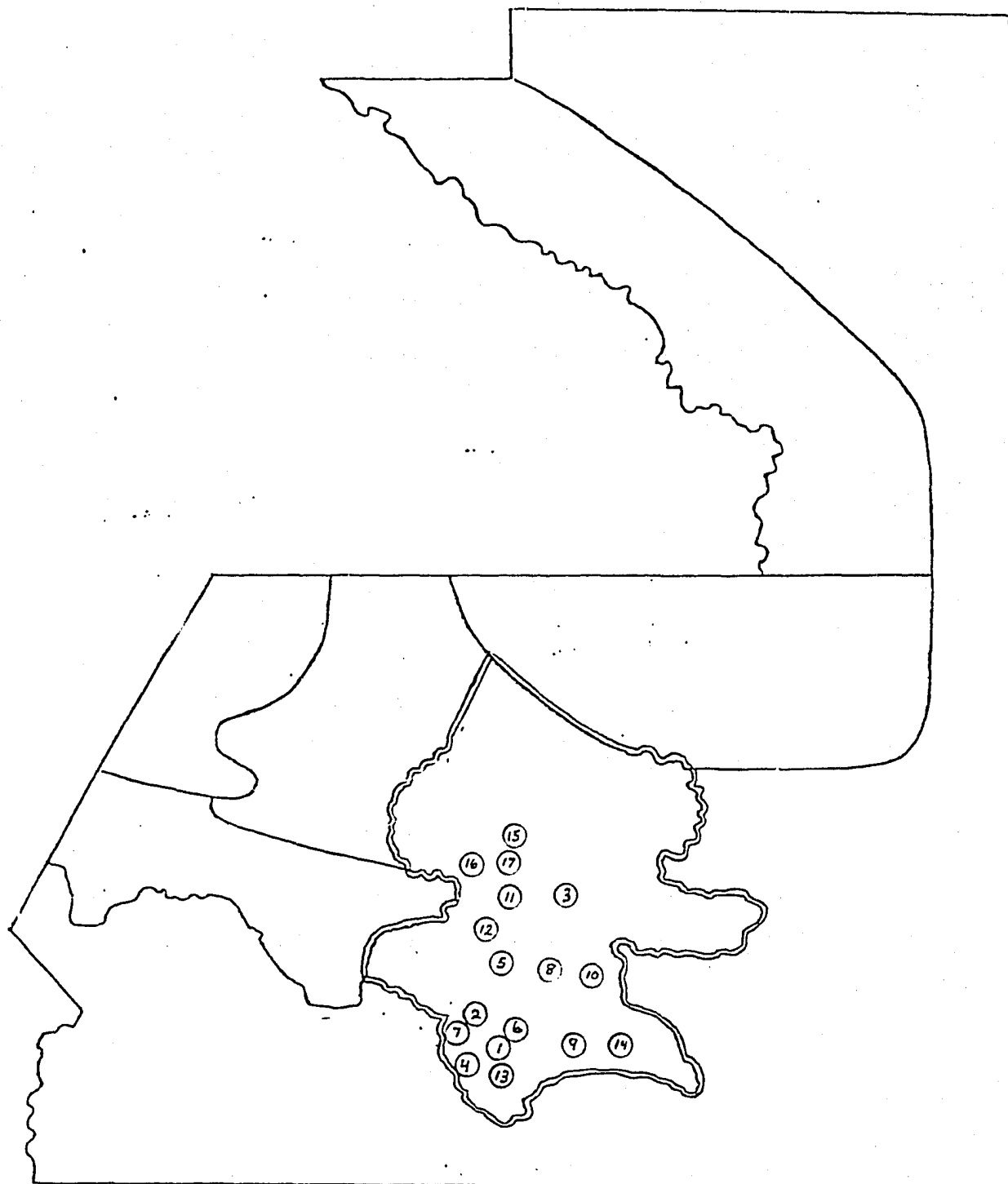
The model resettlement project proposed for Xalbal will alleviate some of the displaced persons problem and may even present a viable solution to the impending flood of refugees that is expected to come in from Mexico. According to BANVI, the project could house up to 300 families. The local Playa Grande military command thinks it is wiser to include only 100 families in the program so that the community will have room to grow in the future and can support itself without outside help. It is proposed that the community of Xalbal have a school, park and other public buildings and facilities to serve its residents. Each family will have a plot of land 10 x 2 meters for its house, garden and animals. In addition, each family will have a 6 hectare plot of land to cultivate crops for personal consumption and cash. Collective projects will be coordinated to help further support the community. It is expected that the road from Playa Grande to Xalbal will be completed by May of 1984.

Although by all signs Playa Grande is a fairly stable zone that is reconstructing itself at a good pace. It is haunted by one problem that is potentially overwhelming: the return of Guatemalan refugees from Mexico. No other zone will be affected as much as Playa Grande when the refugees begin to come home. Estimates of the number of refugees in these camps is in the tens of thousands. No one presently in Playa Grande is capable of handling that quantity of people flooding into the area at one time. Planning for the future is essential if the problem of thousands of homeless and hungry people is to be adequately addressed. The Xalbal resettlement project is a step in the right direction and should be considered and supported. Stores of food, housing materials, and medical supplies should be on hand to prevent any catastrophe from taking place. It is just a matter of time before the refugees return and their needs must be considered now.

In conclusion, the problems facing the zone of Playa Grande can be divided into two groups: short-term and long-term. The short-term problems that need to be faced today include support for the nearly 1,500 displaced persons residing in three camps, and support and assistance for the Xalbal resettlement project to help alleviate the displaced persons problem.

The long-term problems include building communication and transportation systems to link isolated communities with other population centers and planning for the Guatemalan refugees that will be coming in from Mexico. New settlers in the Playa Grande zone will need food, shelter, medical help, and technical support to re-

establish themselves. Without this assistance, the zone of Play Grande could become the stage for one of the worse disasters in Guatemalan history.



Summary: Zone 5
Southern Quiché

MUNICIPALITIES SURVEYED:

- | | |
|------------------------------|----------------------|
| 1. Chiché | 9. Zacualpa |
| 2. San Pedro Jocopilas | 10. Canillá |
| 3. Uspantán | 11. Cunén |
| 4. Patzité | 12. Sacapulas |
| 5. San Bartolomé Jocotenango | 13. Chichicastenango |
| 6. Chinique | 14. Joyabaj |
| 7. San Antonio Ilotenango | 15. Chajul |
| 8. San Andrés Sajcabajá | 16. Nebaj |
| | 17. San Juan Cotzal |

ZONE SUMMARY

In the Department of Quiché, our findings indicate the following:

Approximately 8% of the villages encountered in this area are at present totally abandoned, of these, our investigation showed the possibility at least half being repopulated in the near future.

During the period of greatest violence in the area, (1981 through 1984) perhaps as much as 80% of the population on the village level were displaced. Our findings indicate that this displacement was due to: 10% massacres, 20% destruction of homes and 70% fear.

Burning and levelling of homes and public buildings particularly in the North of Quiché, was widespread during the period of greatest violence. Although there have been reconstruction projects on the part of the Guatemalan Army and other private volunteer organisations, this problem persists in at least 15% of the villages in northern Quiché. At least 35% of the local schools function in outdoor or improvised classrooms. There is a severe shortage of school buildings throughout the region.

We estimate that approximately 60% of the people displaced during the period of violence have returned to their own villages, approximately 10% have settled in other villages, approximately 5% are located in settlement camps and the whereabouts of the remainder (25%) is unknown.

Our investigation shows that on the municipal and village levels, approximately 20% of the population consists of widows and approximately 25% the population being orphans with at least one parent and in many cases both parents deceased.

In general, the crops most commonly planted are corn and beans. Our findings indicate that the last harvest was approximately 60% of the normal volume.

The majority of the people in the populated villages, are already preparing for the spring planting. It is probable that at least 80% of the region farmers will realize a normal planting this year. Farmers who have their own land are able to obtain limited credit for planting and crop maintenance. Those people who plant on lands to which they have no title, are not permitted to receive such aid.

Malnutrition and parasites are general problems found throughout the region. Reports from medical personnel interviewed indicate that at least 40% of the patients treated by them in the past six months, suffer from these illnesses. We estimate that at least 70% of the rural population of Quiché does not have potable water adequately treated. The majority of these people obtain their water from contaminated wells and streams. Also, throughout the region and particularly in rural areas, hygiene orientation is severely lacking, exacerbating the problems of malnutrition and minor common illnesses particularly among nursing children. Insofar as CARE's pre-school nutrition program is concerned, the nutritional

in this region is so great that most mothers divide the minimal food ration donated for pre-school children among the rest of the children in their family. It was reported that in other areas they sell the rations to obtain cash for other family needs.

There exist many villages with no health services whatsoever. Other villages with either a health post or trained personnel report that the greatest deficiency is in the supply and distribution of medicine. Generally speaking, a 3-month supply of medicine delivered by the Ministry of Health, rarely lasts more than one month. Also, the majority of the rural population do not believe in the effectiveness of oral medication. Many of them are also frightened of injections.

Urban and rural transportation is severely deficient throughout most of the department, particularly in the northern region. There are very few buses, in poor condition, which travel between municipal centers and the schedules are sporadic and infrequent. The quality and maintenance of roads connecting municipal centers has improved in recent months due to food-for-work projects sponsored by the Army and Public Work Ministry. Most of the communication, however, between villages depends on poor roads or footpaths. There are at least three bridges in the region which urgently require reconstruction in order to return transport and communication to normal levels. Due to the severe shortage of cash, it has been reported that many truck drivers are being paid for their services with part of the food that they transport to communities. This custom should be taken into account for the planning of future relief projects in Qu

The food-for-work program sponsored by the Army and Public Works, is an attempt to reconstruct schools, roads, bridges, etc. Payment to the workers is made with food but this affects only a small percentage of the needy population. In addition, there have been reports of workers not receiving their payment of food rations even after the project they worked on has been completed.

The raising of levels of expectation is a problem that has occurred in the past. At different times, organizations have solicited information and made surveys with the promise of delivering aid and resources afterwards. Almost without exception, these promises were never kept according to information reported by civilian authorities. In the majority of rural communities each man must serve a period of 24 hours each week in the Civil Patrol. In other communities, where there is a smaller population, the men must serve a longer period of time sometimes up to a full week or month. When they cannot fulfill their service, they are required to find someone to take their place. As a result, these men cannot perform migratory labor as was the custom before the period of violence and therefore, have lost a major source of cash income. In addition, the Civil Patrols have no medicine nor adequate clothing to perform their duties in this region.

On a general level throughout the region, lack of work presents a grave and desperate problem to the rural population. Many widows who still live

family parcels, are attempting to perform the labors of agriculture or with the help of their small children. It was reported in many regions that people, even recent returnees, are considering emigrating again in search of work.

To our surprise, particularly being in one of the areas of greatest conflict we found that relative tranquility has returned to much of the region. With some exceptions, we heard no reports of recent deaths, violence or assaults. All of the roads we traveled on appeared to be thru day or night.

Small communities - it appears that most if not all of the assistance present available in the region is being channeled into urban municipal centers or large villages. Those villages and hamlets with much small populations although numerous, widely scattered and in great need of appear to receive little or no assistance whatsoever.

RECOMMENDATIONS

1. Food - it is our recommendation that only basic grains and food normal to the customary diet of the rural population be considered for distribution. Canned or prepared foods foreign to the normal diet should be avoided. Reported were severe shortages and great need for corn, beans, rice, coffee, sugar, milk and salt.
2. Clothing - insofar as clothing needs are considered, it should be noted that the people of the region, particularly the women, often wear clothing of a traditional nature bearing the symbolic colors and patterns of their villages. Our recommendation is to provide people with appropriate materials, in many cases raw materials (such as thread) to make their own traditional clothes.
3. Medicine - according to the experience of medical personnel interviewed throughout the region, oral treatments are rarely or if effective due to non compliance. Injectable treatments appear to be far more effective as patients do seem willing to return to Health Center for follow-up injections.
4. Housing materials - the greatest need in the entire region appears to be roofing materials and structural wood for houses.

MUNICIPAL SUMMARIES

1. Chiché

This municipality was seriously affected by the recent violence. Throughout the area, there are 466 widows and 1,125 orphans according to local authorities. There is no program in effect to aid these people at present. Last year the National Reconstruction Committee provided food to widows and orphans in this region but this program was terminated due to lack of funds.

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Data provided by the Health Center as to the percentage of diseases shows the following:

1. Protein and caloric malnutrition (PCM)	24%
2. Upper respiratory infections (URS)	16%
3. Parasites	12%
4. Anaemia	11%
5. Acute gastro-enteritis (GECA)	10%
6. Scabies	8%

2. San Pedro Jocopilas

This municipality comprises 14,561 inhabitants.

With regard to assistance, CARE is sending in food, such as flour and oil but in minimal rations. Malnutrition is evident throughout the area. Most people eat tortillas and beans with coffee, keeping their chickens and eggs for sale. Most hamlets lack potable water. People raise, in addition to corn and beans, peas and horsebeans (favas).

There are at least 75 widows with children in this municipality. An urgent need for food and medicine was reported.

3. Uspantán

The municipality of Uspantán has about 44,000 inhabitants. There are signs of relative tranquility here with a strong military presence evident in the town.

Of the uninhabited villages, some people have gone to the coast, others live in neighboring hamlets. It is believed that those on the coast will return, but there is uncertainty about this since many people are still fearful.

At present, there are six villages which remain totally abandoned and at least one village (Macalajau - 500 of 1,000 original inhabitants residing) which suffered a massacre in February 1982.

Malnutrition and lack of health services are evident in this area. Any assistance of a short term nature should focus on these deficiencies.

4. Patzité

This municipality comprises approximately 2,000 inhabitants living in the urban center and surrounding five villages.

The municipal building was totally burned, and is currently being re-built with the help of INFOM.

Authorities reported a severe need for food for a food-for-work program.

Harvests were sub-normal in all of the villages for reasons of being in the rural area.

In the municipality there are 45 widows and about 180 orphans.

There are no medicines in the health post. All medicines must be purchased by prescriptions written by the medical staff.

There are 700 men in the Civil Patrol who are ill-equipped and poorly clothed for the upcoming rainy season.

As in other areas of this zone, food and medical attention are urgently needed.

5. San Bartolomé Jocotenango

The survey of this municipality is incomplete due to the absence of local authorities on our arrival. Specific data referring to widows, orphans, population, etc., was therefore impossible to obtain in the time permitted.

Although this town is quite small and poor, the road leading into it was of first quality and is reputed to have cost 4.5 million.

Local informants reported a poor harvest this year but most farmers intend to plant in the spring.

Health data was unavailable during our visit but informal discussions lead us to believe that approximately 190 widows and 450 orphans are living in the various villages of the municipality.

6. Chinique

The municipality of Chinique also known as Chinique de Las Flores has a population of 6,500. It is located about 35 Kms. from Santa Cruz del Quiché. Its road is paved. Unfortunately, the guerrilla caused a great deal of destruction to it, digging trenches in many places; it has not yet been repaired.

Lack of medicine is general, especially vitamins and antibiotics.

7. San Antonio Ilotenango

The municipality of San Antonio Ilotenango has approximately 8,000 people living primarily in nine villages. The urban area contains only one

43 families. but there are various communal houses used by villagers during market days.

The past harvest was poor since many people have their lands far from the town and are frightened to plant or attend their crops.

Primary illnesses reported are malnutrition, bronchopneumonia, diarrhea and parasites. Much of this is due to the lack of sanitation and orientation towards medicine use. Many people are afraid of injections and hide their children from visiting health promoters. As in the other areas of this zone, food and medical assistance are indi-

8. San Andrés Sajcabajá

Sajcabajá has a population of approximately 14,500 and is situated about 60 Kms. from Sta. Cruz del Quiché.

The road is unpaved. The climate is fair and there are sugar cane plantations producing panela (used to sweeten coffee and other drinks or to prepare native alcoholic beverages).

Much of the violence in this area occurred in 1982 but as recent as January 1984, a bridge was burned in the village of Ixcauleu. Many deaths were reported to have occurred in five of the fourteen villages along with wholesale destruction of homes. Many people have fled the villages and some have returned when the situation stabilized in 1983.

Health deficiencies (malnutrition, sarcopiosis, parasites) were reported along with a severe need for housing in the affected village. Planting and harvesting appeared to be normal in most of this area.

9. Zacualpa

According to 1983 data, Zacualpa has a population of approximately 14,153 people. Throughout this municipality, crops were generally poor and only two villages reported a good harvest. Yields averaged 40% of normal but it is hoped that 1984 harvests will improve to about 80% of normal.

This municipality was very much affected by the violence; five of its villages had massacres and over 5,000 deaths of men, women, children and entire families were reported in Pasoc, Pasajoc, Trapichitos, Tur Chuchucá. At present there are about 300 widows and 1,000 orphans as a result of the violence in the region.

The general problem in this municipality is a lack of food and medicine. The Health Center and PAC (Civil Defense Patrol) are at present developing a latrine project, but there is a lack of food for the patrol's men.

It was also noted that the villages do not have potable water. People obtain water from contaminated wells and this in turn, contributes to the high level of intestinal parasites.

None of the communities have health posts. The one in the municipality has few, if any, medicine supplies.

Destruction of houses occurred in the rural area, but this problem has been dealt with by the individual communities.

10. Canillá

The municipality of Canillá has a population of approximately 14,000 people. Its climate is fair; it has good accessibility.

As to destruction, more or less 50% of the villages were affected. There are, throughout the whole region, approximately 99 widows and 11 orphans. The Chocox bridge was burned by the guerrillas.

The bridge over the Lilillá River was also destroyed and reconstructed provisionally.

Generally speaking, the need of medicine and food is great in the entire municipality. Sarcopiosis and malnutrition were reported. In villages of Sajquim and Chichaj there have been many deaths due to malnutrition according to local officials.

11. Cunén

This municipality has 15,000 inhabitants.

Most people here are unaffected in terms of housing and loss of life. However, there have been problems with harvests, due to general fear of going to the fields.

There is a refugee camp here of 59 families which came from Vill Hortensia, of the town of San Juan Cotzal and also from Uspantán.

They are in need of food and we estimate 25% of the camp population suffers from noticeable malnutrition.

The hamlet of Chutuj suffers similar circumstances as the camp. For those people who are to be returned to their original villages, assistance is needed, specifically for food, work, medical assistance and agricultural assistance.

At present, there is no organized medical service for these people. Army presence is minimal and tranquility appears to have returned to the area.

12. Sacapulas

The township of Sacapulas has a population of 22,000 comprising 13 villages and 32 hamlets.

The most affected region in the area is known as Pié, or Cuesta del Aguila in which are found the more remote villages of Sacapulas. This whole region suffered massacres and a high percentage of destroyed houses. Villages closer to the town which suffered no direct damage were abandoned through fear. Currently, there are no totally abandoned villages, however, in partially abandoned areas many of the villagers have not yet returned due to fear or destruction. Villages most affected are:

Tzununul	-	30-40% widows
Salquil	-	30% houses destroyed
Guantajau	-	30% widows

In these areas there are orphans and ill people. Everyone here needs medicine, food, housing and drinking water. Parraxtut, in the same area, also suffered severe damages. However, due to the distribution of tin roofing and supplies, this village is relatively better off than others in the same area.

Most inhabitants of the township suffer from malnutrition and parasites, this is especially true of children.

13. Chichicastenango

This municipality has about 70,000 inhabitants, living in 64 villages and the urban center. Because of the large size of the town, the Mayor's office was not able to provide complete information on the conditions of the affected areas, but they offered to have each of the village-level assistant Mayors collect more precise data, and to send to PAVA within the next 15 to 20 days. The information provided here is therefore preliminary and general. Military officials provided a partial list of orphans and widows.

They also reported that provisional housing had been set up for people from Chuchipacá I, who have been helped with some food (mainly potatoes) by the Army. They also reported the presence of a private volunteer organization called "Red Integral de Canada" (Canadian Integrated Network) which is building an orphanage in the town.

The health post doctor told us that CARE was helping about 1,200 parents or guardians of affected children of five years or less (CARE pre-school program.) In December this was lowered to 600 beneficiari due to claims that some recipients have sold their ration. The health post continues to attend 1,200 people at the reduced level of aid.

Due to the violence, a number of health promoters were killed, and there are now only 22 left and there are not sufficient funds to train any more. As far as medicines are concerned, they have supplies that last for only a month, provided three times a year. The most needed medicines are ampicillin, vitamin A, and iron. There are high incidences of malnutrition, measles, gastro-intestinal infection and skin infection.

A tabulation of orphans in February 1983 resulted in a total of 2,355 in the municipality. In the hamlets of Xepocol and Saquillá II, there are a total of 116 widows and 284 orphans, at last count. The total number of widows may be as high as 3,000 in the area.

Food, appropriate clothing (or materials for clothes making), medicines and construction materials are urgently required throughout this area.

14. Joyabaj

This municipality comprises 45,000 people within its urban center, five villages and numerous hamlets.

Many people have fled the area out of fear but many others migrate to the south coast following the traditional custom of working there earning money for family needs. It is reported, and widely believed, that a large percentage of these migratory families are afraid to return, believing they will be mistaken for subversives by their former neighbors.

Acceptable crop yields were reported for 1983 relative to the two years prior which were extremely poor. Malnutrition is evident in this area particularly among dependent elements of the communities such as widows, orphans, invalids and aged people. A partial list of over 1,000 names of these people was submitted to us by Civil authorities.

As in other areas visited, medicine and medical attention is severely deficient. The quarterly delivery of medication provided by the Ministry of Health rarely lasts one month.

15. Chajul

The township of Chajul is situated in northern Quiché and has an approximate population of 18,000. It is composed of 24 communities including villages, two displaced persons camps, hamlets and one plantation. It is one of three population centers which form "the Ixil Triangle", so named for the local Indian language.

Population Profile

The most critical problem that this area currently faces is mass displacement of its inhabitants. 16 of the 26 villages are still completely abandoned. Refugees have gathered in the following locations:

La Perla plantation (7-800 people), Chajul (urban center) - where there are people from Chacalté, Chemal, Pal and Pimiento, two camps of Juil and Xepatná, and five repopulated settlements. Of the 23 communities reviewed, all but six reported destruction of houses, and three reported massacres. There are 149 widows with children in Chajul alone.

Due to the degree of displacement and destruction in all of this area, it is impossible to single out any one village in need of assistance. Help is urgently needed everywhere. There is widespread malnutrition, disease, lack of housing and drinking water, clothing and work.

RECOMMENDATIONS

1. Food - all food supplies provided should reflect cultural diets
2. Clothing - clothing provided should also reflect cultural standards and usage since women in this area generally make their own clothing, we would recommend supplying materials such as cotton thread for shirts and local cloth for skirts and pants, as well as any tools necessary for garment making.
3. Work - possibilities in the realm of artisanry, especially with widows, should be investigated.
16. Nebaj

The municipality of Nebaj normally comprises approximately 4,225 people in the urban center and approximately 23,000 people living in rural villages. The normal population has increased considerably however, due to the recent violence. Displaced persons from many villages in the region have fled to the urban center of Nebaj and have formed camps within the town limits and on the nearby air strip. Las Violetas is one camp and contains between 2,500 and 3,000 people, among them 450 widows and at least 150 orphans without either parent living.

La Pista is the camp located on the airfield runway. Although there is constant movement of people in and out of this camp, informal estimates by Civil authorities indicate that at least 3,500 people are currently living there. All of these people are sheltered in open but roofed communal structures and suffer from the cold nights there.

Minimal medical attention is provided this camp through FUNDAPE and the local Health Center but medicines are critically short supply and by no means even begin to cover the needs of these people.

Malnutrition is widespread and severe throughout the municipality. Food, supplied by CARE, is being distributed in the displaced persons camps and some food-for-work projects are in effect in the area. Still, nutritional needs are not being satisfied and medical personnel report that this problem exacerbates the incidence and severity of disease.

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The village of Salquil, which had been completely abandoned now has over 200 recently returned families. They are proceeding with the reconstruction of their village but hopes for a successful crop this year are slim and the need for food assistance is indicated.

Lack of income generating work sources was consistently reported as a major problem in this area. In addition, we believe there is a general and immediate need for food, medicine, seed, fertilizer, cloth and construction materials.

17. San Juan Cotzal

The township of San Juan Cotzal has a population of approximately 11,900 comprising 18 villages, hamlets and farms. There has been mass displacement of the population in this area resulting in total abandonment of most of the villages. Currently, most of this displaced population is living in seven settlements of which four (Asich, Santa Ave. Ojo de Agua, Chichel) are still in the process of growing. These four villages are experiencing a serious lack of food, housing, work, illness and seeds for planting.

The problem of maintaining widows and orphans is critical in Cotzal. According to the Mayor, there is an overall average of 100 women for every 30 men. We have figures for the following areas:

- A) Santa Avelina: (population 2,000) - 14 orphans
- B) San Juan Cotzal: 341 widowers with 248 children, 200 widows with 134 children (information gathered by the local commander and the representative of the National Reconstruction Committee).
- C) In the following villages: Cajixay, Namona, Cancap, Chichel, Bichemal, Tupal, Guacamayán, Bichivalá, Chunlá, Vivitz and Tuchoc, there are 217 widows with 639 children. The population of Chichel comprises 25% widows and orphans.
- D) Asich: 40% widows and orphans.

Health

The most common problems in this area are: malnutrition, cirrhosis, tuberculosis, conjunctivitis, bronchopneumonia, scabies, and upper respiratory infections. There is rarely enough medicine. Local medical sources have indicated that people here prefer creams and injections opposed to oral treatments.

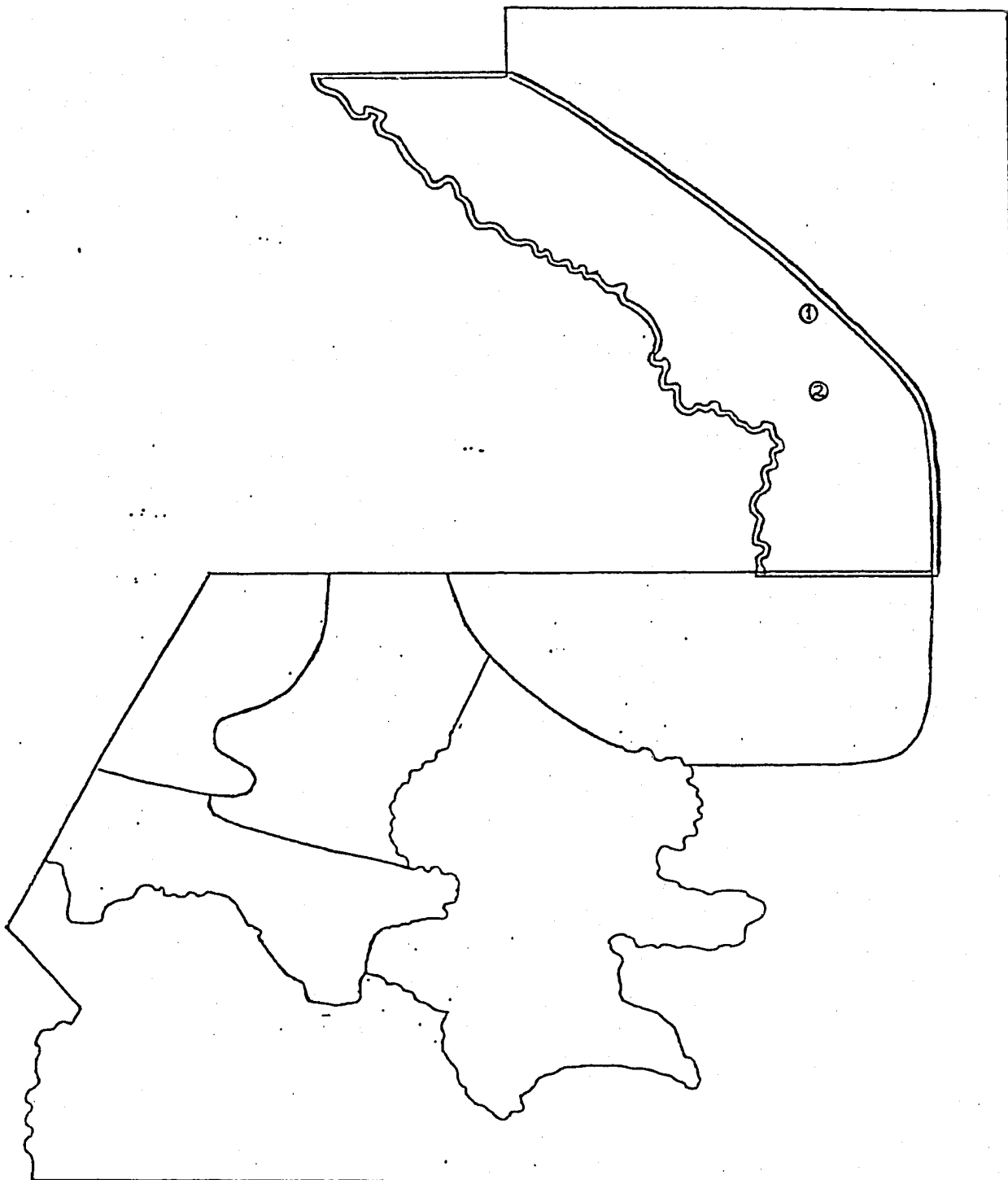
Work

Sources of income are severely lacking in the region. It appears

that three areas hold promise of providing work: Xepatul, Santa Avelina and Xacaltí.

Infrastructure

Currently there is a project to reconstruct a bridge which had been destroyed. However, due to lack of materials, this project has yet to be implemented.



Summary: Zone 6.
Western Petén

MUNICIPALITIES SURVEYED:

1. La Libertad
2. Sayaxché

In addition, villages and cooperatives along the Usumacinta and Pasión rivers were visited during this survey.

ZONE SUMMARY

The problems of this area are principally transportation and health. These, transportation is the most serious, since health conditions are aggravated by the lack of transport.

This area is high in agricultural production but due to the high cost of river transport, prices received by the producer are very low.

There are health stations in the area but due to the lack of roads, they are difficult for many people to reach. For example, if there was a road, it would be about 30 Kms. from the Usumacinta River to the health station at Vista Hermosa. At present, people require 2-3 days to reach medical help.

The lack of accessibility has badly affected the morale of the inhabitants who are disappointed with the Government for not completing the road project it started more than 10 years ago.

The main health problems are those which have always been endemic to the area but which have been aggravated by the lack of medicine since the beginning of the violence.

A potable water project in the Bethel cooperative was abandoned when the Belgian sponsors were scared off. No immediate assistance is indicated in this area aside from the distribution of medicines which are generally lacking in the entire zone.

MUNICIPAL SUMMARIES

1. La Libertad

Population: 1,400

Principal products: corn, rice, beans, pumpkin seed

The principal population centers consist of the urban area of La Libertad along the El Subin - Vista Hermosa road, and the banks of the Pasión and Usumacinta Rivers.

The town of La Libertad has a health station staffed by a doctor, auxiliary nurses, and health technicians. This area seems to have been little affected and without any major problems. The area along the road between El Subin and Vista Hermosa via Las Cruces, has been very much affected by the violence and has lost more than 60% of its inhabitants primarily by migration. The majority of the people who left (colonists from the east) returned to their places of origin, but an undetermined number fled to Mexico. People are now migrating into this area but they are apparently not the same people who left. An example is the town of Las Cruces which, before, had a population of 14,000 reduced to approximately 5,000. It now has more than 8,000 people.

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The road is gravelled as far as Vista Hermosa and was in construction as far as the Bethel cooperative but subversives burned the machinery and threatened the workers. Hence, the project was abandoned. This has greatly affected the population center along this route and especially the cooperatives along the Pasión and Usumacinta rivers.

One community of 300 inhabitants, Las Dos RRs, is still completely abandoned. There are functioning health stations in Las Cruces and Vista Hermosa.

The area along the Pasión and Usumacinta rivers was also heavily affected and also lost 60% - 70% of its population, again mostly through migration. Many of these people fled to Mexico and others to their places of origin. All of the communities along these rivers are cooperatives that have been in operation for about 16 years. Of the people who have left, none have returned.

It is our opinion that the ones who stayed do not want the refugees back. In one cooperative we were informed that "the army" told them not to allow the ones who left to return.

Five cooperatives are abandoned today which, before, had a combined population of 275 families.

2. Sayaxché

Population: 16,276

Principal products: corn, rice, beans

The population centers comprise the Sayaxché urban area (2,000 inhabitants), the region along the road to Alta Verapaz, and the area adjacent to the Pasión and Usumacinta rivers. The Sayaxché urban and Salinas River areas suffered little from the violence.

The cooperatives along the Pasión River have suffered indirectly due to the halt in construction of the El Subin-Bethel highway in La Libertad which is just across the river.

There is a functioning health center in Sayaxché with a doctor, nurses and health technicians.

RECOMMENDATIONS

Medicines should be distributed to the cooperatives, health post and health center in Sayaxché. The cooperatives could be supplied through the National Institute of Cooperatives INACOP. This institute has an office in Sayaxché.

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Health promoters should be trained. This is especially important due to the inaccessibility of the communities. Possibilities for this are through Peace Corps, INACOP, or through the Evangelist Mission "Vida Nueva" in La Anchura. The mission has an almost completed and equipped health clinic but with no professional personnel. It has boats for transportation and a 40' houseboat.

The Government of Guatemala should be convinced of the importance of completing the El Subin-Bethel road with sideroads to the cooperatives.

Consider utilizing the abandoned cooperatives for people from other areas who need land. "El Arbolito" would be very appropriate since it has a concrete block school, health clinic, and warehouses and is situated on the river.

MEDICAL RELIEF PROGRAM

Because the historical lack of medical attention was compounded during the civil violence, the rural highland population suffers from increased morbidity and mortality. Malnutrition, including kwashiorkor and marasmus, as well as respiratory and diarrheal diseases increasing have become life threatening problems. Other widespread medical problems include dermatologic, parasitic and infectious diseases resulting from the lack of preventive programs (potable water, vaccination coverage.)

The most recent accurate compilation of health data comes from HEALTH SECTOR ASSESSMENT, GUATEMALA, 1977, presented by U.S. AID to the Guatemalan government (see Appendix E, Tables 1-6). Of particular note is the fact that Guatemala has the highest infant death rate in Latin America and that 85% of children under five years suffer from malnutrition. While the statistics are outdated, there is every indication that the situation has deteriorated.

Medical field teams consisting of one physician, one nurse and three trained health promoters for each zone will provide clinical attention. The staff for these teams will be selected from Guatemalan pools of medical personnel.

The provision of medical care will be based on a triage system in which traveling promoters will treat, evaluate and refer to mobile clinics staffed by the physician and nurse. Each clinic will be housed in a van containing refrigeration and necessary medicines and supplies.

The field teams will be paid salaries and per diem. The medical director will assign teams to specific areas identified by the needs assessment, oversee the procurement, distribution, and inventories of medical supplies, and collate the medical field data.

In addition, PAVA will make every effort to collaborate with the Guatemalan Ministry of Health in reactivating the rural health infrastructure with particular emphasis on reactivation and expansion of health promoter programs. Many health posts have been destroyed; other

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unstaffed for up to three years. Through its field teams, PAVA will collect data essential to the Ministry for rebuilding rural health programs. PAVA will also provide the baseline demographic data on communities without pre-existing facilities so that health posts might be developed in the future. PAVA proposes, as a stop gap measure, to support medical personnel in the field to compensate for the Ministry's staffing and budgetary problems. PAVA also proposes to assist the Ministry in developing government supported emergency teams for other areas in the highlands. PAVA will always emphasize preventive measures: potable water, adequate vaccination coverage, etc.

Finally, PAVA proposes to collaborate with and provide data to medical relief organizations such as the Red Cross, HOPE, CARE, and Catholic Relief Services in an effort to distribute all available medical resources as efficiently as possible.

(Based on one physician, one nurse and three health promoters per zone
NOTE: medical supplies not included.

A. Salaries (benefits included)

1. M.D. @ \$1,500/mo. x 6 x 12 mos.	\$108,000
per diem @ \$100/wk. x 6 x 52 wks.	31,200
2. Nurse @ \$400/mo. x 6 x 12 mos.	28,800
per diem @ \$50/wk. x 6 x 52 wks.	15,600
3. Promoters @ \$350/mo. x 18 x 12 mos.	75,600
per diem @ \$50/wk. x 18 x 52 wks.	<u>46,800</u>
	\$306,000

B. Equipment

1. Vans (with refrigeration) @ \$30,000 x 6	180,000
2. Motorcycles @ \$1,900 x 18	34,200
3. Medical supplies (to be determined)	<u> </u>
Total:	\$214,200

C. Maintenance (gas, oil and repairs)

1. Vans x 6 @ \$400/mo. x 12 mos.	28,800
2. Motorcycles x 18 @ \$125/mo. x 12 mos.	<u>27,000</u>
Total:	\$ 55,800

D. Insurance

1. Vans @ \$550 x 6	3,300
2. Motorcycles @ \$250 x 18	<u>4,500</u>
Total:	\$ 7,800

TOTAL: \$583,800

21 March 1984

MEMORANDUM

From: F. Stephen Wignall

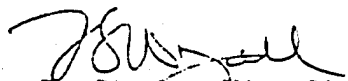
To: Robert Terzuola

Subj: Displaced Persons Needs Survey

1. I would like to express my concurrence with the findings presented at yesterday's meeting by the survey team members. Though preliminary, the data on widows and orphans, foods supplies, current harvest and that expected, and, finally, health needs effectively overlapped to highlight target areas deserving of immediate attention. In particular, the focus on widows and orphans as a means of directing aid at communities most affected by the violence is a notable feature. These communities, persistently stressed in trying to support these groups which are not normally self sufficient, deserve some special attention
2. The survey does two things particularly well:
 - a. It documents clearly perceived need. No relief program will be successful if the people are not queried as to where their problems lie and a response given. An imposition of what we see as required may be of great objective benefit but is of only so much sand if that view is not shared by the people. This problem is only accentuated if their "needs" are not satisfied.
 - b. It not only identifies populations physically displaced because of the violence from their homes, lands, services and livelihood but it documents, as well, that there are others of a significant number who suffer a similar fate though their aldea or even their home may be the same. Plantings and harvesting have been disrupted, crops destroyed or stolen, markets inaccessible because of limited transportation, families have been broken by terrorism and death, government services have been disrupted, etc. It will, in some respect, be more difficult to address these widely dispersed needs than those of the settlement communities where relief activities may be more easily focused.
3. I am in agreement with the comments of the group in regard to the limited curative capability of the MOH. (There was one misuse yesterday of preventive for curative on the part of one of the Guatemalan fellows working in Quiche. The MOH efforts there are essentially curative.) Though I believe in the satisfaction of perceived need, a certain amount of caution needs to be taken in the area of curative care. For instance, much of the present curative capability of the MOH throughout Guatemala would at least be acceptable if the problems of housing, food, water, sanitation and education could be addressed along with logistic support and communication. All the curative care in the world cannot compensate for the striking deficiencies that exist in these other areas. However, until these other situations can be improved, curative care programs need to be bolstered.
4. I urge some caution in interpreting the diminution of family size as an indicator that children are presently dying of starvation. I think that was probably true during the period of most active disruption and still may be true in areas of guerilla

control even at this moment. It is reported still that refugees, particularly children, continue to arrive in terribly malnourished condition and give histories of having lost other children while in flight. In my personal experience and that of Sr. Rose Cordis in Jacaltenango, while pervasive significant malnutrition persists, at least in non-conflict areas there has been a little improvement. I do not think that death from starvation can be documented.

5. Thank you for sharing your effort. I look forward to your actual data presentation and final report.


F. Stephen Wignall

NOTE: Dr. Stephen Wignall, M.D., specialist in tropical medicine at Gorgas Memorial Hospital, Panama, offered the above informal comments and evaluation of the survey.

Dr. Wignall's comments reflect his own experience in the area before and during the PAVA survey.